

Medical Economics

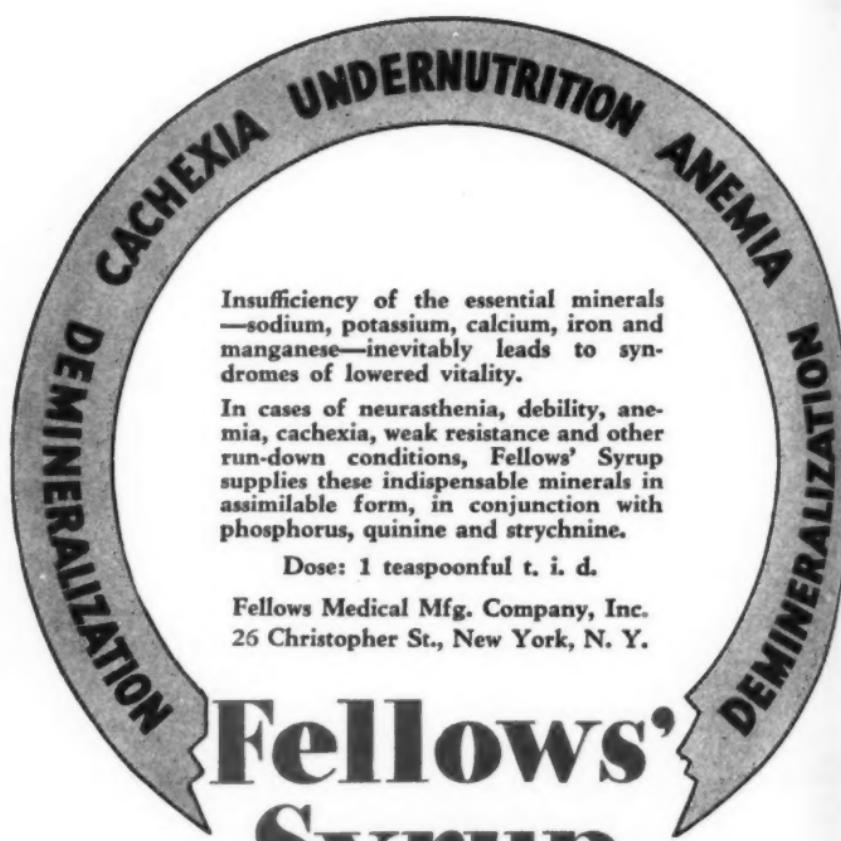
Business Magazine of the Medical Profession



JULY 1932

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MEDICAL ECONOMICS

The Business Magazine of the Medical Profession

JULY, 1932 • VOL. 9, No. 10

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MEDICAL ECONOMICS: Published at RUTHERFORD, N. J.
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Injuries of MUSCLES, JOINTS and TENDONS

When treating injuries of the muscles, joints, and tendons, it is now generally agreed that the effort should be towards certain definite directions with certain objects in view. These are:

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2. *The promotion of repair*
3. *The restoration of function*



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A finger twitched on the trigger of a weapon the anti-pistol laws had failed to keep out of a thug's hands. Four years later a police officer lay helpless, still paralyzed by the bullet flattened against his spine that night. Death held odds of a thousand to one when a plea flashed over the police teletype. Was answered by an offer of blood from every member of the force. Their comrade had the courage, they'd give him the good, red blood that might carry him through a thirteenth operation.

He knew the odds, but there was one chance that the operation would restore the use of his hands, enable him to supplement his small pension. If it failed, he'd no longer be a drain on these small funds. Either way he'd be doing a little something for that brave wife, and that hero-worshipping boy of his.

So he faced his doctors with a smile, confident that skilled hands and his friends' blood would do what could be done. For the rest, matters would depend largely upon the same determination that had carried him through twelve other operations.

The surgeon has scarcely a more potent ally than his patient's will to live. Yet even the strongest will must

often fail but for the modern achievement that makes the blood of strong men available for those whose need is desperate. And there is added confidence for both patient and surgeon in the knowledge that subsequent infection can be prevented by aseptic methods and the use of safe, yet effective germicides.

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Wax Beans

Tomatoes

Beets

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July, 1

Speaking Frankly

Logic

TO THE EDITOR: The article by T. Swann Harding is quite typical of the type of person and reason employed in criticizing the medical profession. It is a criticism based primarily on one case from which a generalization adverse to the medical profession is drawn. Fundamentally the reasoning is unsound—and illogical.

In the second place the comparisons made are not of similar things, nor like conditions; hence the conclusions are wrong.

In the third place, Mr. Harding evidently ignores all rules of logic in trying to establish a fact. He forgets that it takes more than one case—his case—to establish a generalization of the fact he accepts, namely, that his case is a prevalent situation.

I believe there is plenty of room for improvement in medical practice, but this must be the outgrowth of reasonable and logical constructive criticism, preferably by someone familiar with more than one case.

J. E. Whitlow, M.D.

Picture

TO THE EDITOR: I have just finished reading Dr. Waring's article on fee-splitting in May MEDICAL ECONOMICS, and I want to send him my most sincere commendation and congratulations. He certainly has painted the picture exactly as it is, and I endorse every word of it.

This analysis in print should give a good many of our brethren something to think about on the subject of fee splitting.

G. C. Nedry, M.D.

Bizarre

TO THE EDITOR: Recently there have appeared several articles concerning advertising material—descriptive literature covering pharmaceutical preparations, special instruments, etc. Naturally each manufacturer presents his literature in a different form, arrangement, shape, and size of booklet.

Concerning many of these preparations and instruments I would like to preserve for permanent reference some of the most important data. At present I have five different file boxes containing a bizarre collection of descriptive literature that I want to preserve.

If these many manufacturing concerns, in addition to whatever booklets, etc., they prepare, would issue a filing card of uniform size, I could keep the information in much more orderly shape,

and more readily accessible when I am in a hurry.

I mention the card size 3 x 5 because several concerns have already issued filing cards in that size: Merck & Co., Upjohn, Wm. S. Merrell Co., R. W. Gardner, Chas. H. Phillips Co., Kahl Water Co., Burroughs Wellcome & Co., New York Pharmaceutical Co., Schering & Glatz, Inc., Mellin's Food Co., Whithrop Chemical Co.

This idea need not interfere with any firm sending out as extensive or ornate literature as they may desire. This literature could be preserved after being read or discarded as the individual saw fit. But the filing card as an additional item would enable one to permanently preserve in a small space the essential data when need for the same arose.

If you think this idea is feasible and worthy, you might pass it on to the manufacturers. I want to assure you of my appreciation of your valuable publication, and the continued interest with which I receive each new issue.

C. LeRoy Brock, M.D.

Clipped

TO THE EDITOR: I have just read Mr. Richardson's article in May MEDICAL ECONOMICS on a "well balanced financial diet," and consider it one of the best, if not the best I have ever read. I have clipped out the entire article and will keep it for future reference for myself and my son.

N. B. Wagner, M.D.

Flounder

TO THE EDITOR: I wish most heartily to congratulate you on the things you are accomplishing with MEDICAL ECONOMICS.

Until your brilliant journal came into the offing, these were the things that I had been advocating for many years. I feel that your magazine is most perfectly filling a long-felt want of the medical profession at large.

It surely has been nothing short of an economic crime, for the students of medicine at our colleges to be left to flounder for themselves for years in order to "get their eye teeth cut." And at what expense, what grief and loss, and what heartbreak and series of disappointments!

Within an economic vacuum, the average inexperienced neophyte of the GEN-US MEDICUS is easy prey for the "trile of get there Eli." He is made an easy mark for every "come on" game that has ever been invented; and if any new ones come to the fore, the basic reason for their development is to mullet him, as he is well known to be receptive to all the blue-sky and hot-air traps ever baited!

Most of us well know this from ex-

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George Frederick Messer, M.D.

Blame

TO THE EDITOR: In his article, "My Case

Against Private Medicine," T. Swann Harding expresses an entirely unjust criticism of the medical profession.

One factor he decries is the expense of hospital care. However, since hospitals are not owned by the medical profession, but usually by the laity for their own profit (if they make any), Mr. Harding, in deplored their fees, is laying the blame on his own fellow men.

Hospital charges have nothing to do with surgery fees; and I fail to see any reason to involve the surgeon in a dispute concerning a bill incurred through a hospital.

Although the patient described in the article paid \$1400 to the hospital, Mr. Harding fails to state how long he remained there, the price of his room, the fee of the special nurse, and the costs of other flexible items which the patient could no doubt have modified for himself. Why not let him distrust his own business ability?

Under Mr. Harding's plan for state medicine, or its equivalent, the only thing the ailing individual has to do is to call the proper Government office, and a doctor will be sent to treat him. No mention is made of this doctor's ability. He may be good. He may be bad. The principal consideration seems to be that he operates without any charge. Perhaps Mr. Harding would like to have this kind of an M.D. operate on his own gall bladder?

What the public needs today is certainly not state medicine. It already has the U. S. Public Health Service working to solve the relation between the sciences in controlling human disease, and specifying where this or that science is relevant.

What the public needs is better judgment and faith in the family physician.

Let's have cooperation instead of continual opposition!

F. J. Barkman, M.D.

Interne

TO THE EDITOR: In your recent issue I read an "Interne's Retrospect." I hope you will publish my comments on it herewith.

The interne receiving \$125 at the end of his first year is just that much more fortunate than the average interne who gets nothing IN THE WAY OF MONEY. In any event, is it fair to ask the hospital directors to pay the bills of the injured and helpless?

Just what is the average interne worth when he enters the hospital? The views held by attending physicians of any city hospital staff on this point would be enlightening.

How many hospitals to-day require an interne to work more than eight hours per day, and how many anaesthetics do internes give?

In the matter of deliveries, just how

much time does the interne put in, and how often is it left to the nurse in charge to decide when he shall be called?

To the visiting physician, how personal and sympathetic are the average interne's services?

When the interne "furnishes sleep and rest to the weary," how does he go about it? Does he visit the ward personally, or does he leave a standing order for "hypo, p.r.n." or telephone? The plaint of our hero that medicine is a hopeless and unrewarding profession, indicates that he is getting out of it what he put in.

The average medical student can get his pre-medical preparation for nothing, but the State is quite correct in requiring adequate preparation though there may be argument about the practical minimum.

Is there any occupation (for that is his label for medicine) which assures the newcomer anything in advance?

The refreshing note in the "Retrospect" is an appeal for mercy from above. Judging by observation of many years, the modern interne's services make this inclusion advisable.

It seems to me that the writer of "An Interne's Retrospect" has missed the point of it all; for throughout his letter is written one word, SELF. Can any physician after years of service, taking all the ups and downs of life into consideration, say there is any other light for his feet than the professional ideal that requires subordination of self interest to the welfare of the patient?

Ralph I. Lloyd, M.D.

Wary

TO THE EDITOR: Your very interesting article in May MEDICAL ECONOMICS, "There's Gold in those Ledgers," contains a phrase "be wary of collection agencies."

This statement in a publication having a circulation of 130,000 is, in my opinion, unfair to the vast number of sincere and reliable men who, for years, have conscientiously serviced medical accounts all over the country.

Collection agencies have rendered a very valuable service to the medical profession. It is true that among them are some—as you will find in any profession or semi-profession—who do things that the majority would not countenance; but were you fully conversant with the true situation, you would make it clear that there is a distinction. Nearly all of your articles relating to collectors are misleading in that you point out the bad spots only and do not show the constructive "cure."

The official Medical Credit Bureau may ultimately be the solution, but up to this time only twenty-two have been organized and we understand that a number of them are not functioning. The medical profession would lose an enormous amount of money if it waits until an official bureau is established in every community, if ever.

I. M. Cohen

Combat Summer Diarrhea with Powdered Protein Milk



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MEDICAL ECONOMICS

The Business Magazine of the Medical Profession

The Profession Answers

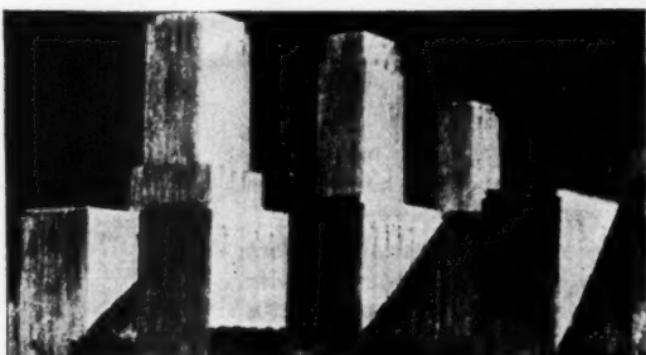
Ballot cards from June MEDICAL ECONOMICS are arriving at the rate of more than 500 per day.

The reaction of physicians to MEDICAL ECONOMICS' poll on hospitalization is decisive.

Count of the early returns shows:

1. Physicians reporting over-hospitalization outnumber those reporting under-hospitalization by almost 4 to 1—and those reporting the situation satisfactory by 5 to 1.
2. The number of physicians in favor of Smaller Hospitals and Clinic Units is almost six times greater than those favoring Larger Hospitals and Medical Centers.
3. On the question "Could patients frequently be saved an expensive stay in a general hospital by one of the methods reviewed in the article?"—THE VOTE IS ALMOST UNANIMOUSLY YES.

If you have not expressed your opinion, refer to Pages 47, 48 and 49 of June MEDICAL ECONOMICS—study the article—check your opinions on the reply card—and mail (no postage needed).





The suggestions in this article are the outgrowth of the author's own experience in establishing and conducting the Seattle Convalescent Home, Seattle, Washington.

"Four years ago," he explains, "I was faced with the problem of beginning practice in Seattle, a city of 400,000 residents and about 1,000 physicians. I hit upon the idea of opening a convalescent home, with a rate of \$15 a week.

"We opened with one bed, one patient, and one nurse-cook-chambermaid. We have grown to twenty beds—always full."

The wood-cut illustrations were drawn by Helen B. Markey, wife of the author, for the prospectus of the Home.

Opening A FIELD FOR THE BE

PRESENTLY, when the young doctor without funds aspire to invade the city he is confronted with two interesting alternatives: he may establish himself meagerly in an office and make the rounds of successful practitioners—begging for crumbs that fall from their tables; or he may obtain employment as an apprentice.

In the first instance, he travels a thorny path. The crumbs, in these latter days of depression, mean poor-pay and no-pay patients, or undesirable night calls. It cannot be other than a discouraging business. Begging will prove uncongenial to a majority.

The apprenticeship is often a necessary substitute for inadequate post-graduate work. For training it may be a desirable expedient, but in all cities of my acquaintance the ratio of "jobs" to applicants is as twenty to one. And at the end of the apprenticeship or other salaried work the problem of striking out into private practice is scarcely less difficult than for the man who ventures into the city from medical school.

I mean to suggest only what every city practitioner knows: the first years of private endeavor are full of hardship for the needy young doctor.

In 1930, Dr. Ray Lyman Wilbur's *Committee on the Costs of Medical Care* published an essay by E. H. Lewinsky Corwin under the title *Institutional Convalescence*. I quote the following excerpts:

"Provision of institutional care

ing a Convalescent Home

THE BEGINNER • By J. J. Markey, M.D.

for those recovering from a grave illness or an operation is of particular importance to those too poor to afford a suitable environment for convalescing. The housing and family conditions of a very large number of people in the wage-earning and low-salaried classes are such that ease, quiet, good food, and peace of mind cannot be obtained at home.

"Aside from the need of beds for acutely ill patients, it is far more expensive to care for convalescents in a hospital, where the per capita cost is about \$5 a day, than it is either at the home of the patient or in a convalescent institution, where the per capita cost is less than half of that. The average cost per patient per diem in a convalescent institution at the present time is about \$2. . . ."

"The convalescent home is the response, therefore, to the three-fold economic demand: from the hospitals for rapid clearance of beds for acute cases; from the impecunious sick for assistance in regaining health in a trying time; and from the community to employ the most efficient, and at the same time the least costly methods in dealing with this serious aspect of the problem of disease. . . ."

•

It has been noted by Dr. Corwin and other recent commentators that there is an impressive shortage of convalescent homes in the United States. In 1930 the American Conference on Hospital Service held a meeting entirely devoted to the problem

and appointed a committee to promote the idea of institutional convalescence.

Of what significance is all this to the young doctor beginning practice? Palpably, it provides him with a short-cut to the economic security he desires.

A large number of American convalescent homes are owned and operated by nurses, practical nurses, or rooming-house matrons. The ordinary one has two to five patients—the majority, not more than one. Some suffer long periods with no patients. Medical observation is casual and the equipment of many is inadequate.

A doctor intimately connected with such an institution may increase its usefulness and versatility at once. Besides the types of convalescent cases indicated by Dr. Corwin, it may enlarge its scope to receive all manner of chronic ailments: cancer, tuberculosis, nephritis, paralysis, the elderly and infirm; mild mental and neurological cases; those patients suffering from alimentary and cardiac diseases, diabetes and metabolic disturbances; asthmatics—and that not inconsiderable class of city dwellers afflicted with "general debility".

If the doctor is alert and ingenious such a home may be developed to care for all types of cases not apt to require major surgery. Indeed, the possibilities of the institution are limited only by the endowments of the doctor. If he is competent he will increase his capacity to meet any demand of the undertaking.

How—the query forever bulks



large—can he effect a beginning without funds?

First, he will require an ordinary, livable house. Its location should be on the edge of town, and it should have, if possible, a view and verandas or lawns bathed by sunshine during sunny seasons. Further, it should be easily available to tram-car and automobile. Inaccessibility will repel patients, relatives and consultants alike, and will make his own daily routine unnecessarily difficult for the doctor who must maintain a downtown office. A selected house may want for all other desirable qualities if it possess this one of availability.

Houses, large and small, may be rented, leased, or bought for a down-payment. The payment may be as small as fifty dollars. (In not a few instances, curiously—nothing at all.) And the doctor and his wife may make it their residence, at first, to save rent. If his wife cares to assume the nursing of the first few patients there need be no overhead beyond that which would be required for their own board and roof.

An alternative is to effect a partnership or other arrangement with a woman who can cook without wasting food; who can, under immediate instruction, do simple practical nursing; who can keep a room clean, and above all who is amiable, calm, tolerant, ingenuous, and not too easily

upset by the trivial. Any woman over 30 who has "kept house" for five years will possess enough of the necessary qualities.

Such women, usually widows, may be found in large numbers in any city. A want-ad in a daily paper will secure a dozen. She may have a home that will serve the purpose for a beginning. Since, in any event, the place will be her residence, she may be induced to pay a share of the initial rent.

I labor these minutiae because most needy young men I know are daunted by the earliest problems.

"If I had a thousand dollars I'd begin tomorrow," one recently said with determination.

"If you're ingenious you won't need a cent," I told him.

Perhaps no other gift is as important as ingenuity. The conduct of a convalescent home early, like that of a rural practice, will continually tax it. Not only in the varied medical problems that present themselves, but in those also involving electric bell systems, plumbing, mosquitoes, heat, lights, radios and a host of others, for the solution of which it will prove expensive to employ expert, outside assistance. I know the doctor-owner of a 50-bed sanatorium who arises each morning at five o'clock to bury the garbage of his institution.

I will dismiss the question by suggesting that any city will provide a multitude of houses which measure up to the simple requirements, and a profusion of women eager to embark upon an enterprise having as much promise of success as this type of business. It becomes the more appealing to these latter when they learn their responsibility will be closely shared by a reputable doctor.

At first, only one ordinary bedroom with one or two beds need be provided. [TURN TO PAGE 99]

Ability to Pay

IS IT A LEGAL BASIS FOR FIXING THE FEE?

By Leslie Childs

MAY the patient be charged according to his ability to pay?

The principle involved has long been a moot one. Courts have upheld it. Courts have denied it.

The subject cannot be covered by any hard and fast rule. Rather must the outcome of each case of this kind necessarily depend, not only upon the facts involved, but upon the jurisdiction in which it arises as well.

In view of the importance of the subject, a brief review of both lines of holdings should prove interesting and profitable.

*

In a recent case, the plaintiff, a surgeon, tendered certain services over a period of several months, which included a goiter operation, upon the wife of the defendant. When the plaintiff presented his bill, a dispute arose over the amount culminating in his appealing to the courts to enforce collection.

Upon the trial of the cause, the plaintiff's witnesses, who were physicians and surgeons, estimated a proper fee to range from \$500 to \$15,000. The whole matter was passed on to a jury and the trial resulted in a judgment for the plaintiff for \$3,500.

The defendant appealed from this and assigned as an error the admission of evidence showing the size of the estate that would be liable for any judgment rendered. This evidence tended to

show that the estate in question amounted to about \$1,600,000, and that in making his charge, the plaintiff had taken this into consideration. Further, there was evidence of a custom among the physicians and surgeons in that locality of basing charges upon the ability of patients to pay. In upholding the admission of this evidence, and in affirming the judgment, the higher court said, in part:

We are of the opinion that the rule best supported by reason, . . . is that in some substantial measure the reasonable compensation of the physician is determinable by the ability of the patient or her husband to pay for the service, since the contract for the service was by the physician directly with the patient, for the service to be rendered to the patient, the services including a major operation, and it being shown by competent evidence that it was customary among physicians to charge for such



service in some measure according to the ability of the patient to pay for such service. The judgment is affirmed. (Supreme Court of Washington, 293 Pac. 249).

So too, in another case of this kind, involving the question of the reasonableness of a physician's charges which were based in a measure on the financial standing of the patient, the court in upholding the claim reasoned as follows:

Law and jurisprudence have not laid down any hard and fast rule for guidance in the matter of physicians' charges. Courts must of necessity, to a very great extent, rely on the opinions of reputable members of the profession as to the value and character of the services rendered. And such charges are not to be determined wholly upon the skill of the physician, nor upon the amount of services rendered, but the value of the patient's estate and his ability to pay may be taken into consideration. (Supreme Court of Louisiana, 151 La. 73, 91 So. 551).

In harmony with the foregoing, the courts of Pennsylvania and New York appear to sustain the right of a physician and surgeon to consider the wealth of a patient in fixing fees. And now let us turn to the other line of cases in which the courts have declined to approve this method of arriving at charges for services. For example:

In one leading case on this subject, the plaintiff, a physician and surgeon, introduced evidence of the pecuniary standing of the defendants in support of the reasonableness of his charges. The trial court instructed the jury that this evidence was to be disregarded in arriving at their verdict. On appeal, the higher court in approving this instruction had this to say:

The instruction is, we think, correct. There is no more reason why this charge should be enhanced on account of the ability of the defendants to pay, than that the merchant should charge them more for a yard of cloth, or the druggist for filling a prescription, or a laborer for a day's work. It is true a physician in general practice will often be called upon to treat indigent persons from whom he will not be able to recover the value of his services.

He may take this into account and regulate his charges with reference to that fact, just as a merchant may take into account probable bad debts in fixing his per centum of profit upon his goods. But the value of a service depends upon the difficulty of rendering it, and the skill required in its performance, and, sometimes, upon the results accomplished, and not upon the richness or the poverty of the person for whom the service is performed. (Supreme Court of Iowa, 47 Iowa 625).

In another similar instance the court reasoned:

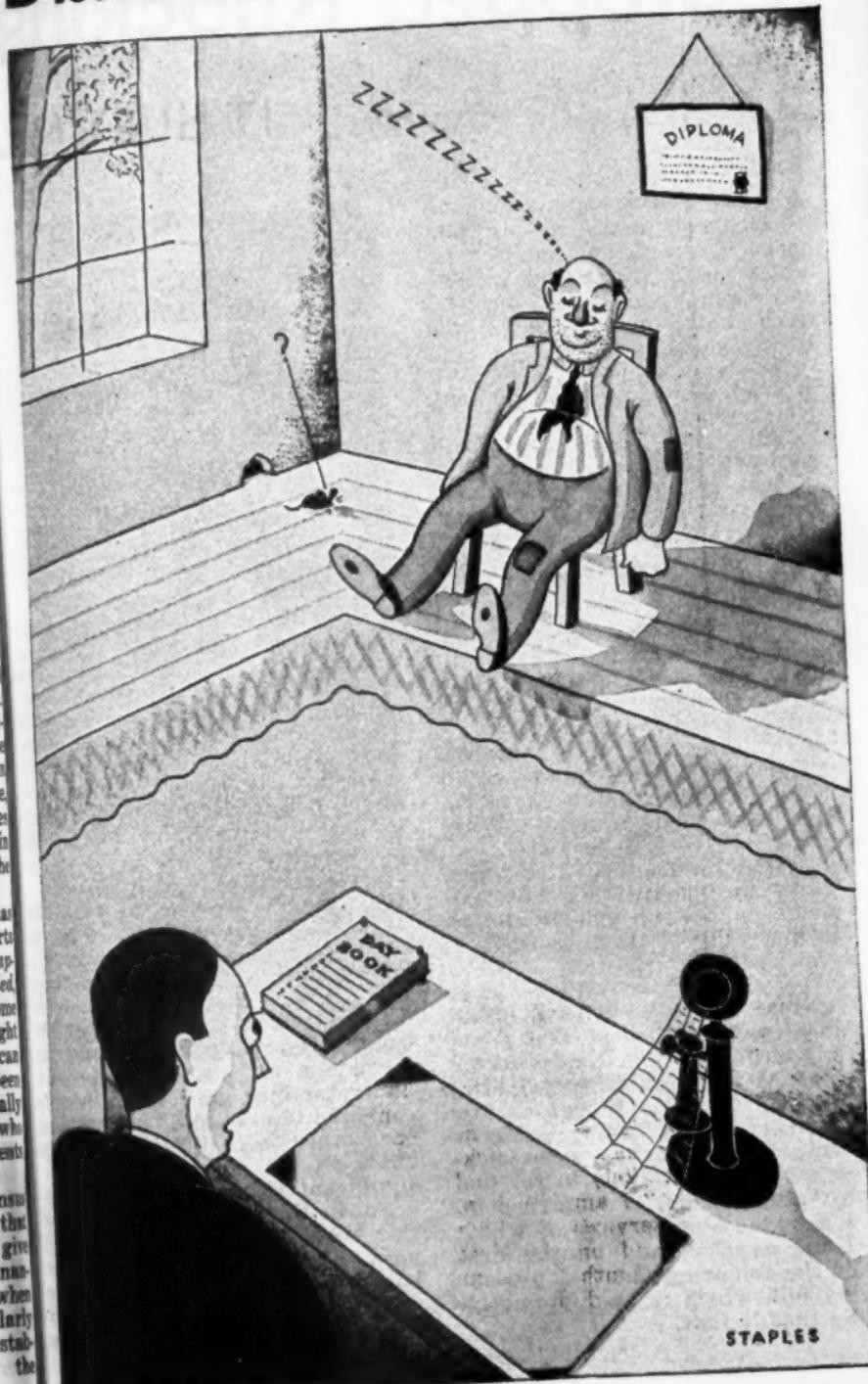
In a case of this kind, if the plaintiff is entitled to recover at all, he is entitled to recover the reasonable value of the services rendered. He is entitled to a verdict for the reasonable value of his services, although the defendant may be a poor man. He is not entitled to a verdict for more than the reasonable value of his services, although the defendant may be a man of great wealth. The jury, in a case of this kind, have no concern with the question of the defendant's ability to satisfy the judgment. (Supreme Court of Missouri, 203 Mo. 363, 101 S. W. 571).

The courts of Alabama, Arkansas, and Texas, appear to be in accord with those of Missouri and Iowa as exemplified above. However, it is difficult to arbitrarily classify some of these cases because of variations in their facts. But, taken as a whole, they fairly reflect the two lines of judicial reasoning indulged in by the courts in passing upon the question raised in this article.

In so far as this question has been passed upon by the courts of last resort, the decisions appear to be about evenly divided in numbers at least. But, in some of the cases denying the right to charge what the patients can afford to pay, action has been brought against persons legally liable for the services, but who were not themselves the patients receiving treatment.

Taken all in all, the consensus of legal opinion seems to be that a physician or surgeon may give some consideration to the financial standing of his patients when making charges, particularly when the custom is well established among members of the profession in his locality.

Disillusioned Doctors



1. His first patient.

I Stopped Knocking

IT HURT ME, NO

AT two o'clock one morning my telephone rang—as my telephone has a vicious habit of doing at such ill-favored hours—and when I answered I heard a voice that I recognized as that of our chiropractor.

"Doctor," he said, "my wife is in labor. I wish you would come over."

"All right," I told him, "I'll be there within a few minutes."

Then during the process of changing to a more appropriate professional attire, the phone rang again.

"Doctor," came the same voice over the wire, "You had better hurry. She's having one pain right after another."

The process of changing clothes was speeded up, but before it was finished he called again.

"Doctor!" he fairly shouted, and the tone of his voice betrayed no uncertain amount of agitation, "The baby's here. What can I do?"

"What you can do," I told him, "is to stay away from that telephone until I can get my clothes on and I'll come over there."

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From the above you will probably be led to believe that I am this chiropractor's family doctor—which I am, or at least I have been up to now. Whenever any member of his family sustains some injury or has some sickness that is not likely to respond to "adjustments," I am called in. I give the best services of which I am capable, and on the first of the following month I present my bill, which is paid promptly. So that is that.

Some years ago, when I began the practice of medicine, I had an idea that any person engaging in the healing art who was not a regular licensed physician must necessarily be an unprincipled, dishonest grafted, imposing on a credulous public, and living by means of the blood-money that he extorted from them.

In short, I had been taught to believe that an irregular practitioner was a "devil incarnate," who should be socially ostracized, shunned like the proverbial victim of the plague, and knocked and belittled on every possible occasion. However, I soon learned—and the lesson cost me dearly—that the physician who so believes, and then proceeds to engage in a personal open warfare, finds that his weapons of offense are only boomerangs which invariably exert their greatest destructive force on their return.

In a small town, where everybody knows everybody, personal animosities do not remain in a mild state very long. They either fade out almost entirely, or they become very bitter. The close contacts and the more or less intimate associations of the people make for an acquaintance and understanding, and when people come to know and understand each other their differences often change from mountainous to insignificant importance.

So, in time, I learned to know this chiropractor. We would meet at the post-office, at the hour when everyone went there to get mail. We were constantly finding ourselves in the same

g the Cults

NOT THEM • By Victor R. Small, M.D.



"If the matter of cultism is treated lightly by the physician, treated as being of no importance one way or the other, frequently the family will also consider it of no importance and drop the idea."

group that would gather on the corner to discuss the news of the day. We would meet on the golf links and occasionally go around in the same foursome.

As a result, I began to learn that this fellow was a flesh and blood human being, moulded from the same clay as myself. I found him to be a really likeable sort of person, in spite of his being a chiropractor, and whatever personal animosity we had for each other soon disappeared, and our social relations became amiable and pleasant.

This was as it should be.

However, you may wonder, what about our professional relations? That can be answered in a word by stating that there is not, and never has been, any such thing. Consultations, of course, are entirely out of the question, and I consider that in professional matters he is entitled to the same consideration as any layman, no more and no less. He knows that I consider his field as being unscientific "hodge-podge," of no therapeutic value in any case, and that I do not consider him as being a doctor-taking the term in its old and true meaning. The public knows this as well.

However, in the professional field, our paths do occasionally cross and situations frequently arise that might become awkward if not handled with tact as well as with firmness.

On one occasion, I happened to be treating a woman patient who was afflicted with a low-grade chronic cholecystitis. I learned from an out-



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Office Schemes

By AN INTERIOR DECORATOR

YOU recall in the "Arabian Nights" a story of a certain gruesome cave, above which was the chilling inscription, "Abandon all hope, ye who enter here!"

It has often occurred to me that this inscription would make a peculiarly appropriate wall motto for many a doctor's office.

If the doctors had set about with some perverted sense of psychology to make their offices as dismal and uninviting as possible, I question whether they could have done a much more thorough job. Perhaps the old-time medical man, like the old-time preacher, held to the belief that an atmosphere of repression and gloom was an indication of dignity and decorum. A doctor's professional standing was measured, perchance, by the degree of fear and trembling experienced in approaching his sanctuary.

But the doctors of this day have broken with that tradition. They realize that, of all places, a doctor's office should inspire cheer, friendliness and warmth. It should radiate the hope of health and happiness. In brief, the environment should work for the doctor and not *against* him.

All forward-looking medical men appreciate and acknowledge this simple truth. But not always do they know how to bring about

The consultation room on the opposite page belongs to a New York physician. Notice the simplicity of the decorative scheme. This is a good example of how dignity and cheerfulness can be combined.

such a condition in their own offices.

Since the Reception Room is the heart of an office, let us give it first consideration. More and more, we are bringing the "living room atmosphere" to the modern office. If the patient is to feel "at home" then the room itself must be "homey." And this can be done without sacrificing a particle of professional dignity.

Is there any logical reason why a Reception Room that fairly shrieks "hospital"—a room that is cold and stiff and "starchy"—should denote a greater degree of technical skill than an environment that is human and livable? Certainly not! And the bigger the doctor, the more likely he is to lean toward the "humanized" office.

Our decorative scheme will depend, naturally, upon the room itself. If we are so fortunate as to have natural light, then the exposure of the room will determine the colors. Northern and eastern exposures are dark and cold. In such rooms we require warm, vivid colors—red, gold, tan, rose. Southern and western exposures call for cool blues, greens, purples, greys. The draperies will of course be in harmony with the general color scheme of the room. Monk's cloth is an acceptable and inexpensive material. It may be dyed any desired color.

If we must depend upon artificial illumination, as is too often the case, we will remember that dark colors absorb light; tend to make a room seem darker and smaller.

Our colors will be selected with

a thought to the lighting. We know, for example, that under artificial light, most blues appear a bit sickly. But this may be offset to a degree through the use of rose-colored shades.

The Reception Room floor may become quite a perplexing problem. Our preference is for all-over carpeting, with small rugs (Orientals if possible) to break the monotony. Such a room is warm and inviting, with the added advantage of silence.

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In the matter of furnishings: Let us make them as "homelike" as possible. While an office must be an office, there is no valid reason why desks and bookcases should not be beautiful as well as practical, or why chairs should sacrifice their principal province of comfort.

And above all, let us not put these plenishings on dress parade. Nothing so completely destroys the friendly "feel" of a room as furniture that is primly and precisely placed. How often have you entered a doctor's office to find the Reception Room chairs backed firmly against the wall, arranged with geometric exactness. No wonder patients sit with folded hands and resigned countenance awaiting the inevitable summons. No wonder they speak in bated whispers as in the presence of the dead.

That sort of thing is bad business. Bad for the patient. Bad for the Doctor.

Arrange these chairs into "gossip groups," with small tables, ash-trays and conveniently arranged floor lamps.

And this is highly important: Bring *life* into your room. A canary or some goldfish will work wonders. Cut flowers (even artificial ones will serve) and growing plants are splendid decorative touches. At least one doctor of my acquaintance keeps a bowl of fruit on a Reception Room table. Just a little home-like touch.

A number of doctors whose offices are situated in old residences have the advantage of an open fireplace. Some have gone so far as to have artificial fireplaces built into their modern offices. Few touches add more to the restfulness of a room.

The matter of wall decorations will demand more than casual consideration. The old-time standardized illustration of the country doctor racing the stork has rather outgrown its usefulness, though much can be said for such pictures on the ground of human interest.

In selecting pictures for Reception Room walls, care should be used to avoid depressing subjects. Gay prints and tastefully selected etchings are best. If means permit, an original landscape will add a touch of dignity and distinction. Large paintings however, should not be used unless the room is quite spacious.

Hangings or tapestries may be employed as background for cabinets, bookcases, etc., just as they are frequently used in home decoration.

Remember, it is the "living room atmosphere" we are seeking above all else. Anything which tends to this end without sacrifice of professional dignity is a distinct contribution.

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In recent months there has appeared some slight tendency toward the modernistic in furnishing the professional office. I do not unconditionally say "thumbs down" to this movement. Perhaps an occasional big-city specialist who has an ultra-modern following, may be advantaged by the modernistic move.

But I can see grave danger for the average [TURN TO PAGE 95]

Another consultation room in which simplicity reflects the good taste and dignity of its owner. This corner is attractive but not showy.

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By R. A. Swink

How to Gauge Fees

AN object can have no value unless it has *utility*. That is, the object, or service, must yield the buyer *satisfaction* before he will pay anything for it."

This brief elementary statement of a principle in Economics, by Professor Taussig of Harvard, suggests a text from which I desire to make some comments that are applicable to the work of the doctor.

The two terms, "cost" and "value," are often thought of as synonymous. But they are not. The *cost* of an article or service to its producer may have little if anything to do with the *value* placed upon it by the buyer.

Value is wholly a *mental* concept. It is a matter of opinion. One man may place a value on a thing twice as high as another man. It all depends on the mental background or "collateral thinking" from which the individual draws his concept of value.

*

The producer of an article or service must evaluate it before he tries to sell it. He must decide what he thinks his handiwork or skill should be worth to the buyer, and then get the buyer to accept that value. That is the essential function of a salesman—to get the buyer to accept the seller's price as a reasonable value.

This is particularly true of a professional service. The fee a doctor asks for his work should first be determined by the doctor himself on the basis of what HE believes his service is worth to the patient. Not, please notice, on

the basis of what he thinks the *patient* thinks it is worth, and certainly not on the basis of what some other doctor might charge, but primarily on what *he himself* honestly believes.

The reason, I think, that so many doctors are unable to get adequate fees, and conversely, that so many laymen think that doctors get exorbitant fees, is simply that doctors do not themselves have a clear-cut idea of the *value* of their services. They have done the job so many times, and have given so little thought to evaluating their work, that like Conwell's "acres of diamonds," work that is really priceless in value to its recipients is considered by the doctor as commonplace and hence of little value. They are frequently trapped by the same fallacy as the thoughtless layman who attempts to evaluate a professional service on a "time and materials" basis.

Now it is axiomatic that before a salesman can sell successfully, he *must first sell himself* on his proposition. The steps, therefore, that lead to proper fee predication may be set down somewhat as follows:

First, evaluate your service in each instance on the basis of what *you* think it is worth. Some of the factors entering into that evaluation are the patient's economic and intellectual status, the

THE THEORY OF COST AND VALUE

selective demand for your service arising out of your own standing and reputation in your work, the result you obtained for the patient in terms of restored health, least amount of his time taken and inconvenience caused to him.

Second, having determined the value of your service by frank facing of all facts so that you honestly believe your evaluation to be a just one, then study the art of conveying that value to the patient. There isn't a great deal of satisfaction to be derived from a doctor's work if the patient is left with the feeling that the fee is "too high" or "unreasonable."

A doctor has not really completed his task until he adds that final touch of magic which builds up in the patient's mind the proper conception of what his service is worth, so that when the fee is announced the patient not only is satisfied with the work itself, but with the fee as well.

The successful physician is one who has learned the happy art of satisfying his patients on both

points. He who neglects this second step, will either be getting wholly inadequate fees for his work, or will be regarded as charging exorbitant fees, neither of which is desirable. The ideal situation is to receive adequate compensation and be loved for getting it.

Third, factors such as what other doctors are charging for similar services, or the "this town is different—you might get those fees in New York and Chicago but not here" argument, are all of *secondary* consideration. True, they should be considered, but the basic thing to remember is that the value placed on your service must come from a *mental* concept of it. That concept must come either from *your* mind or from your patient's mind. It is obvious that since you are the one being sought after, you have the point of vantage and should be the one to determine the value of the service.

Of course, there come times like the present, when we are overwhelmingly in what is called a "buyer's market." That is, the supply of most commodities and services so far exceeds the demand that the buyer can almost name his own price for anything and get it, just as during the war era, when the tables were reversed and we were in a "seller's market," the seller could name his own price and get it.

The first and foremost factor is for the doctor to arrive at his own estimate of value, and then later adapt it, as his judgment dictates, to these other secondary factors.



The Cost Argument

I AM graciously privileged to show the readers of MEDICAL ECONOMICS the following translation of a personal letter written by Dr. Edwin Liek, a former resident of Danzig, Germany, to his friend, Dr. Fred D. La Rochelle, of Springfield, Mass. Dr. Liek is the author of "As a German Doctor Sees Social Insurance," an article in May MEDICAL ECONOMICS.

Dear Colleague:

I have recently come to this island of Tenerife to write a few books that for long have been dear to my heart. By the end of July I hope to be finished, and then very likely I will go to a suburb of Berlin and try to develop a modest practice.

It is a bitter turning for a man of my age, when I think of the successful practice I had built up at the cost of so much sacrifice. Before the war I was worth \$160,000. In 1921 I was offered that amount for my clinic. Now I am lucky to have it rented for \$3,000 a year, but happily I saved my books. These were dearest to me. My whole belongings are gone. As a result of socialization fourteen private clinics have been closed and a few others are about to give up.

I would not want to see your country adopt social insurance. Here the consequences in the way of corruption and waste have been frightful. The system is falling to pieces. Even in France, where a modified system has prevailed for two years, violent opposition is rising. In Germany, unemployment insurance is a very cancer gnawing at the vitals of our national life. Advise your countrymen to keep their fingers away from social insurance—nothing good would come of it.

"A bitter turning," Dr. Liek calls it.

But this is a day of "bitter turnings." We have had "bitter turnings" galore—in lives ranging from the workingman to royalty. Medicine is no exception.

We cannot rightfully condemn the socialization of medicine on the basis of hardship to ourselves. Unselfishness has always been

ent in Socialization

the creed of medicine. A stronger condemnation is provided by facts like these:

Germany's Sickness Insurance Fund, for 1930, showed a deficit of 200,000,000 marks. A sum of 18,000,000,000 gold marks is required to place the system on a sound financial basis.

The average loss of time per year on account of sickness is now 16.5 days in Germany; in America, 6.2 days—according to Dr. Edward H. Ochsner of Chicago. German authorities, desperate, ordered that more than one million patients be investigated by special medical officers, and 56% were found to be malingering.

Figures as convincing, or more so, can be found concerning the operation of state medicine in England, and even—as represented by the Veterans' Bureau—in America. Today, confronted by problems like the bonus, costs of armaments, and an unbalanced budget, the American government is in a particularly fine position to appreciate the *cost argument* against state medicine.

Individual tragedies, like the one so frankly described above by Dr. Liek, make colorful reading, arouse emotions in the hearts of all practicing physicians. These things we can discuss among ourselves, with an accompaniment of mutual sympathy. Yet the combined voices of all the doctors practicing in the United States, raised in one mighty chant of personal objection to state medicine, would not be one-tenth as effective as one authoritative document proving that *both sickness and the cost of treating it increases with socialization*.

Organized medicine should think that over. When it decides to go to bat on the matter of state medicine, it should hammer home the idea that the politicians are more than likely to find some tragedy of their own in socialization.

H. Sheridan Oakitel

"The Country Doctor"

"DR. MATTHEWS" JOINS

HOWEVER fast the rural physician may be disappearing in person, collectively his place as a national hero is assured.

Immortality overtook him three years ago in the form of the film drama "The Country Doctor," the lead in which was played by Rudolph Schildkraut.

And now comes still further glorification. At 10 P.M., June 20, in Station WJZ and associated stations of the NBC "blue network," switches closed for the first time on a new fifteen-minute program entitled "The Country Doctor." The schedule calls for the reappearance of the program each Monday, Tuesday, and Wednesday night, at the same hour. Sponsors are Lambert Pharmacal Company.

The creator of the program, and its lead character, Dr. Matthews, is Phillips H. Lord, the "Seth Parker" of the National Broadcasting Company.

Mr. Lord conceived the idea for the new radio character and

wrote the script from which he sold the idea to the sponsors.

Medical advice (to the listeners, at least) will have no part in the fifteen-minute sketch. "Dr. Matthews" limits himself to prescribing pills and poultices of wisdom, humor, and philosophy.

Country doctors he knew as a boy in the by-ways of rural Maine, so the story goes, form a background against which Mr. Lord has sketched his new radio personality. As he conceived the character, the doctor is a man a little past middle age, a bachelor with few family ties, if any. He is pictured as a practitioner skilled in his profession and wise in his judgment of men—part scientist, part philosopher and part priest. He is tolerant when he may be and stern when he must be.

Mr. Lord elaborates: "It seems to me that the country doctor who is a familiar figure in all of



— a New Broadcast

RADIO'S IMMORTALS

the small towns of the nation at the turn of the century, is as true a type of 'vanishing American' as the Indian. I don't think he has disappeared entirely and I don't think he ever will, but it is too apparent that the swift rush of modern civilization has shoved him farther and farther into the background.

"Many factors, as I see the matter from a layman's point of view, figure in this change. Most of these factors are good, but at the same time they are resulting in the elimination of a type that endeared itself to millions and was a staunch bulwark in the development of the country.

"In this new effort, I have endeavored to present an entirely new type of character to the radio audience, and in so doing it has been my earnest endeavor not only to present him so that he will be a welcome radio visitor in the homes throughout the country, but also so that he will bring honor and dignity to the noble profession that he represents."

The fifteen-minute program "The Country Doctor" will be almost a one-man show for Mr. Lord. He writes the scripts, conducts the rehearsals, directs the broadcasts, and plays the part of the doctor. He looks upon his new role with an intent appreciation of its human interest possibilities, and never misses a clue that leads to a new idea. The work of preparation includes rehearsing a different cast for each performance.

Others of his programs are: "Sunday Night at Seth Parker's," "Uncle Abe and David" and "The Stebbins Boys."



Phillips H. Lord, creator and portrayer of "Dr. Matthews." (Opposite page) Mr. Lord in character.

The Doctor and his Investments

To conform with the shift in the financial scene, the investment programs on the opposite page, first introduced in May MEDICAL ECONOMICS, are now brought up to date. Since types of securities only are suggested, the choice of actual stocks, bonds, and mortgages should be made in accordance with rules already outlined.

Before investing in any recommended issues, make sure that you have—

1. Set aside a sufficient cash reserve to cover your *total* expenses during the next six months,
2. Taken out adequate insurance of the several types required,
3. Adjusted the percentages on the opposite page to compensate for your individual differences in age, earnings, number of dependents, etc., and
4. Limited your selection of securities to those of the very highest grade only.

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Confronted with the problem of properly insuring himself, the physician will do well to consider the advantage of an annuity. Today, with financial conditions as disturbed as they are, the cardinal essential of an income is not "How large?" but "How sure?" Most of us would be better able to enjoy our money if we could worry about it less. Moreover, the statisticians tell us that the man who banishes all fear of want during his later life by providing for it with a fixed income is the man who lives the longest. Apparently, to subtract worry is to add years.

As the examining physician of one of our leading insurance companies has observed:

An annuity is the best elixir of life I know of. It sometimes seems as if annuitants never die. We have many of our books who top 80, 90, and even 95 years. The secret is that financial worry and fear of the poor-house ages and kills off more people than all the deadly diseases combined. Release an old man by means of an annuity from all this worry, and he throws off his years and walks erect, happy, and fearlessly young.

In appropriate cases, annuities are definitely attractive. To the physician along in years and without dependents they yield an income greater than may be obtained from any form of conservative investment, and they guarantee him a fixed return from year to year about which he need never worry.

As with other kinds of insurance, there are annuities of many different types. Each is designed to fit the requirements of a particular class, and each should be investigated independently by the prospective purchaser. Rather than go into too great detail here, I shall touch upon only the more frequent kinds, and explain their function in the financial scheme of the physician.

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The form of annuity most suitable for the average professional man is the *life annuity*. The insurance company handling this type of contract agrees, upon receipt of a specified sum of money, to pay the annuitant a fixed income during his entire lifetime, beginning usually at an age between 50 and 70. Although payments continue without interrup-

By WILLIAM ALAN RICHARDSON

tion as long as the insured lives, they cease immediately upon his death, and the principal remains the property of the insurance company. This is why the income received from a life annuity is unusually large compared with the income obtainable from stocks and bonds whose yield is commensurate with the earning power of the company issuing them.

Example: Suppose a physician aged 70 has savings totaling \$10,000. For a number of years he has been receiving 5% or \$500 annually on his principal. Since this is not enough for him to live on, he purchases a life annuity which guarantees him an annual income of \$1068. When he dies, this man will leave no estate; nevertheless, [TURN TO PAGE 69]

The doctor with about \$5,000 to invest may safely place:



40% in U. S. Government bonds; 20% in State and municipal bonds; 20% in underlying first mortgage bonds of public utility (phone, gas, light) operating companies; 10% in guaranteed first mortgage certificates on improved urban real estate; the remainder in building and loan shares.

The doctor with about \$20,000 to invest may safely place:



40% in U. S. Government bonds; 25% in State and municipal bonds; 13% in underlying first mortgage bonds of public utility (phone, gas, light) operating companies; 10% in industrial bonds of chain-store, food, and cigarette companies; 8% in guaranteed first mortgage certificates on improved urban real estate; the remainder in building and loan shares.

The doctor with about \$80,000 to invest may safely place:



45% in tax-exempt U. S. Government bonds; 30% in tax-exempt State and municipal bonds; 8% in underlying first mortgage bonds of public utility (phone, gas, light) operating companies; 6% in industrial bonds of chain-store, food, and cigarette companies; 7% in guaranteed first mortgages on improved urban real estate; the remainder in building and loan shares.



"Toting Hospital"

A NEW IDEA IN RURAL KITBAGS

By D. H. Duffie, M.D.

So long as patients continue to live in rural regions, probably some of us doctors should live there too. Country practice was all very well for the old fellows. "Them days" they could practice as good medicine one place as another. The modern doctor, however, has never been hospital-weaned. The sad result is that if he does locate at Crossroads, he all too often feels that any attempt at scientific medicine might as well be abandoned, once and for all.

So he cultivates a line of talk that will get by with the natives, dispenses pills selected according to price per M, sagely diagnoses the non-obvious as worms, liver, ovaries or "intestinal flu," glibly explains away the tragedies, and — there you are.

Truly, medical ideals in The Sticks cannot be so lofty as in a teaching hospital; but even so, said ideals need not exactly wallow in the mud, though the doctor himself may.

On the opposite page are some glimpses of the operating room and the laboratory of the "Toting Hospital."

A leather Gladstone bag, with its interior remodeled, houses the entire outfit and weighs "with all on board" $2\frac{1}{4}$ pounds.

Seldom can you take the rustic patient to the hospital, so during ten years of country practice, one of my hobbies has become the taking of the hospital to the patient. For when you have followed the ponies for an hour or two in reaching a victim out where cars roll not, it is really desirable to have your stuff along when you get there. The plumber's technic of going back after the tools is sometimes disastrous.

Next to having your things along, is *knowing* that you have them, and where. Few things are more disruptive of New Year's resolves than the finding afterward, in a dark pocket of the bag, that very hickey you had so desperately wanted Out Yonder.

The doctor usually carries his stuff in a bag, yet even the so-called "Country Style" bags in the catalogs seem about as incongruous in a rural environment, as an elderly New England spinster on a dude ranch.

The general idea of a bag seems to be a shining array of vials, also rows of dark pockets, surrounding a gloomy central abyss where the owner can paw the junk over until haply he finds the missing link. My own effort has been to smoke this junk out into the open to see who's here. I wanted my equipment spread

out on pages like an open book.

We contend that a doctor's bag is as inherently individual as are his spectacles or false teeth, and should be fitted to the wearer. The one here described fits the writer, and is set forth in the hope of giving some rural colleague a hunch for getting himself fitted to one, since the thing is evidently not for quantity production.

Our "Toting Hospital" is housed in an 18 inch, aluminum-frame, real leather Gladstone bag discovered in Uncle Sears' catalog. The original partition down the center of the bag bears on one side two useful pockets, left side for gloves, catheters, records, and charts. On the other side of this central flap is riveted a sheet of hard fibre board, .060 thick, bristling with vial and bottle holders, also a delectable little microscope.

The adjacent half of the bag displays (not conceals) a five af gauze, 2 x 10, and $\frac{1}{4}$ x 30 adhesive, speculum, hemocytometer set, bloodpressure outfit (mercury one, too!), stomach and nasal tubes, and a little emergency surgery kit assembled to our specifications.

All sundry items are induced to stay put by loops of fine coil spring, "flexible curtain rods" from the Five-and-Ten. These loops of coil are anchored down by ties of left-over suture material to holes drilled in a very wide "U" bent from a four-inch strip of fibreboard, running the length of the bag, the upturned ends of the U bolted to the bag frame. (Can't the printer dig up a sort of Dachshund U one bag long and only a half bag thickness high?)

That's all for the north wing of the "hospital." The other half is divided by a hard fibre partition that we have hinged in, and which splits this half of the bag as the egg splits

a sandwich. Each face of this added partition bears a row of high-visibility pockets about 1½ inches deep and from one to three inches wide. These pockets are made of fish netting, 1½-in. mesh, stained a light brown by brushing with a thin solution of asphalt roof paint (not tan) in gasoline, to prevent "glare" and increase visibility of objects behind the netting. (Hot water dye solutions are not so good; the strands are too much fulled and kinked by them.)

Bottoms of pockets are closed and contents supported by an angle-strip of sheet aluminum riveted to the fibre board, while the mouths of the pockets are supported and somewhat puffed by more loops of coil spring threaded in and out through holes drilled in the fibre. Any attempts to sew masses of snarled netting true into place on both sides of the partition once lead straight to manic depressive. The layout must be planned and the work temporarily secured in place.

Contents of the netting pockets are of course a matter of personal whim. Some items in our wall in plain sight follow: tubes eye oint. silver dope butyn. surgical lubricant atropin 5 and 20 cc. iu. yaller oxid hemostatic serum ophthalmoscope dental forceps first aid for burns throat swabs ephedrine nasal insuline ophthalmoscope insulin thermometers, slide g. u. syringe Kaha containers and—laugh—webbing straps for tump line in carrying the bag the rest of the way on foot when the car is stuck. After all, the thing is somewhat heavier than milady's handbag, though no heavier than can be carried readily from car to house by any man physically able to do country practice: 29½ pounds, with all on board.

Along the lower edge of this fibre sheet below the pockets and secured mostly [TURN TO PAGE 79]

Not Guilty!"

Answers This Hospital Manager

This incisive reply to the article "Too Much Hospital," in May MEDICAL ECONOMICS, comes from a layman-manager of a large hospital on the West Coast. In accordance with the author's preference, his name is not published.

but he treated them harshly and said, "What ho! Shall thou profit by my industry and bring your patients to my hospital that I by my wealth and influence have built? Nay, but if they wish the treatment of a man and a physician, thou shalt turn them over to me and I shall operate and treat them and collect the fees for the same."

Therefore, the others took counsel together among themselves and gathered to them the outcasts from some other privately owned hospitals where the servants bowed only to the owners and their friends. And they borrowed and built them a hospital where all might come who desired, whether young or old, rich or poor, as long as their physicians were members of the guild in good standing.

And they said to each other, "Come, now, let us be wise here-with, and take unto us a man who is learned in matters of money and overseeing, for why should one of our number reap trouble and jealousy by being exalted among his fellows as we have seen in the past among those who have cast us out."

So they grew and prospered and their fame became known throughout that region, and all who were ill resorted thither and were healed of their infirmities, for they ate of the foods that were best for each disease, and

Edition 101 year

drank the waters of healing, and were bathed and nursed by women of experience who were gracious to all physicians and their patients. And as soon as the sick were quit of their infirmities they returned rejoicing to their families and their friends.

And the owners of those hospitals and clinics in the beginning became old or died, or the ill will they had engendered returned to them one hundred fold, so that their substance was wasted and the place that knew them once knew them no more forever.

With all due sympathy for the Los Angeles Pediatrician (for we know there are hospitals such as he describes), will he condemn all hospitals for the faults of those closest to him? Does he not resent the criticism of the public for the medical profession because some of them are careless, or ignorant, or charge too much?

Hospitals included under his too sweeping charges, some of which are founded and others are not, certainly will resent the inferences he draws about all of them, for there are many of us still who do not "dramatize" illness but try to educate the guest to a knowledge of every detail of treatment performed and keep his expense at a minimum.

There are hospitals that never take an X-ray without a doctor's order; that never take anything but a routine laboratory examination except by the same authority; that never advise accommodations beyond what the guest can afford; and even go to the expense of more general nurses to save that patient the cost of "specials."

And will this pediatrician say that an average of nine days or less is too long an average stay for the run of hospital cases, some of us running close to a third of patronage with orthopedic patients who often have to stay for months?

Because we advise mothers to have their babies in hospitals, is alarmed. Yet the obstetricians are quite as insistent that the come to a hospital because of the inconvenience at home. Would this doctor have his own wife confined at home? Should the mother of three or four children go through one of her greatest trials with only the nursing help of relatives in a crowded apartment or cottage, with all the noise and confusion and care of the household constantly upon her.

Perhaps many tired mothers have not told him as they have us that coming to a hospital and being served their meals in bed with loving, tender hands to care for them, is the only vacation they have had since they were married! The hospitals are certainly not making money at the rates they usually charge maternity cases.

Then as to records. Among his own fraternity are the ones who became so ashamed of the fee-splitting, the long stay in hospitals through careless workmanship and antiquated methods and the many other abuses that had grown up, that they instituted the inspection of hospitals and records of every case, which without question has reduced the average stay from over twenty days to less than nine.

No doubt records are a "terrible nuisance to doctors," as he says. But they have had a most healthy influence on the physical well-being of the public as well as on their pocketbooks—and the latter seems to be one of the things over which this doctor is worried. Were all physicians honest to their vows and their profession and never made the same mistake twice, records would not be necessary. But we are not in Utopia.

As to nursing! Would "Angel Sarah" be able to do one of the complicated treatments now re-

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quired of nurses, or even give a bath properly to a fever patient? And does this pediatrician wish to carry around with him the apparatus for the treatment he may prescribe, take the time to explain how it shall be carried out, and also take the responsibility in case his orders are not followed, should "Aunt Sarah" decide to use some of her home remedies?

He will find on sober reflection that most if not all of these complications of which he complains have been woven about him by himself or his fellows in their anxiety to care for as many patients as possible in each twenty-four hours. If he wishes to return to the methods of his fathers why not dispense with his automobile also and use a horse and buggy and be really leisurely?

There is no excuse for either graduate or under-graduate nurses to be less gracious to the doctor who has just hung out his shingle than to the one who brings ten or more cases a day. Neither is there any excuse for mistakes or errors of consequence in either group if there is proper supervision. A change of superintendent of nurses should be made if errors occur with undue frequency. And the same can be said of the housekeeping staff. He will not find the abuses of

which he speaks in a well managed hospital.

Would this pediatrician throw out the technicians, the X-ray, physical-therapy, and other apparatus, and return to the methods of even twenty years ago? Perhaps his particular specialty does not need them as much, but we doubt if he can speak for the orthopedist, the urologist, or even the surgeon. We can cite him case after case that would not be well or even alive today had it not been for some simple test or treatment at the hands of a technician.

Cuisine—what crimes are committed in thy name! But we still can name this doctor several hospitals where he can go and not be awakened until a late hour in the morning, served delicious hot coffee, have his eggs just the way he wishes them, and a smile and quiet service therewith—all for less than he will have to pay at any hotel to which he would go.

And pray tell, who is going to serve those nourishing, appetizing meals at home when the wife or mother is ill? Does he wish to take the time to prescribe and weigh out the diabetic, salt free, protein free, or other diets, for each of his patients?



Being just an ordinary lay person with no medical experience, I venture to speak for some others as well who fail to see where or how a doctor who has trained along but one line since he left high school can consider himself equally competent in accounting, purchasing, familiarity with mechanical equipment, or even economical and proficient staffing of a hospital. It would be quite as sensible for a physician to feel that he should supervise all other activities connected with the medical profession, such drug stores, surgical supply houses, and the other hundred industries centering around care of the sick. [TURN THE PAGE]

The Rationale of FARASTAN as an Anti-Rheumatic Agent



The clinical success of Farastan (Mono Iodo-Cinchophen Compound) in the management of arthritic, neuritic and rheumatic conditions is based on the unique form in which the iodine is incorporated in the cinchophen molecule. This insures the combined effect of cinchophen and nascent iodine, and explains why Farastan relieves pain, helps to reduce swelling and increase motion, with an unusual freedom from undesirable side reactions.

**Write for literature and full size package
for clinical trial.**

**The Laboratories of
THE FARASTAN COMPANY**
137 So. 11th St. Philadelphia,

With all due respect to the thousands of splendid men who are physicians, it can be truthfully said that their business acumen is well measured by their leading place on the "victim" list of every questionable stock and get-rich-quick scheme in the country.

Institutions that are not courteous and obliging to their patron physicians are not worthy of their support. But a physician administrator would be one of the first to lose his temper with the doctors who insist on having the world and everything in the most unreasonable way, with no thought of extra overtime labor that must be made up to the employees. The surgery is a good example; every doctor insists on operating in the morning, making the hospital carry just double the staff that would be necessary if the operation could be spread out through the eight or ten hours. One of the largest problems in hospitals is the amount of waste caused by some physicians in extravagant use of supplies, wrecking linen, and demanding "service."

"nice" whether an emergency or not. At the same time they are the first to belabor the hospital for the expense caused their patients and for the overhead—a large part of which they cause themselves.

Diagnostic facilities independent of the doctor, and which will protect the public, are not often found in the smaller hospitals because they cannot be afforded, therefore the trend has been toward the larger centers. If these in turn are becoming machines with no heart and only existing for commercialism, as is charged against some physicians, there should be a change.

But correction of details is not attained by wholesale accusations. Would it not be wiser to change by local agitation the glaring examples of mismanagement quoted than to include all large hospitals, all those under lay or religious management, and the evils mentioned, under one scathing indictment?

There are many of us still who can truthfully plead "Not GUILTY."

The Inertia of Collecting

BEIDES the general lassitude and inertia on the part of many physicians, concerning the collecting of accounts, there is another factor. It is the reluctance to pay a commission. Frequently the doctor, or his secretary, holds the bills until the debtors have either moved away or have lost the ability they may have previously had to make payment.

They have the short-sighted idea that the percentage paid to the Bureau represents so much loss. They overlook the fact that if the Bureau can collect two \$100 accounts at 33 1/3%, the doctor is better off than if he held the two himself and collected only one of them.

GEORGE A. TOTTEN, JR.
MINNEAPOLIS CLINICAL ASSN.

Everybody's Business

By FLOYD W. PARSON

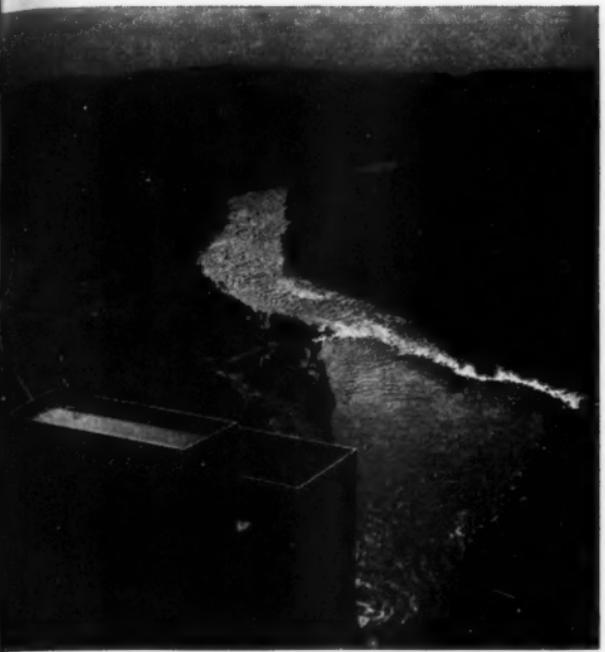
WE Americans have made a mess of opportunities. Having come into possession of the richest treasures the earth holds, we proceeded with all possible speed to dissipate our heritage. Worse yet, we made a mockery of patriotism and turned our land into a cesspool of greed, fraud and deceit.

It has been proved without doubt that we are the world's prize nation of boobs. What we are going to do is only what we deserve. Our pride has been dragged in the mire of the most profound stupidity history has ever disclosed. The pity of it is we have taken our licking lying down, without any show of fight. We have prayed for current miseries to end, refusing at the same time to raise a finger to stop them. It is no wonder bankers have shown a contempt for public opinion, and lawmakers ignored the wishes of those they represent.

Now that the day of reckoning is at hand and the country must choose between order and revolution, between constitutional government and chaos, there comes at last the welcome evidence that courage and sanity still exist. Powerful forces are moving toward the only possible remedy for the present crisis, which is the creation of an emergency government that knows no political party and aims only to serve and protect the constitution and people of these United States. This should put an end to all compromising with evil forces. It will give us a group of honest, fearless intelligent men to rally around.

And this effort to save the nation from utter ruin comes none too soon. American morals have reached the lowest levels in history. Destructive and misleading propaganda is shot at us from the pulpit, the university, the legislative halls, the radio studio, the editorial sanctum and the street corner. Beasts in human form steal and murder our children. Racketeers collect tribute from business and industry. Bootleggers grab millions of our money and pack it into secret vaults, paying no income tax whatever. These same bootleggers contribute heavily to prohibition and other movements that render illegal the very activities that net them such a huge profit.

Down in Washington a horde of lobbyists using gang methods have messed up the tariff laws, caused the enactment of destructive class legis-



DARKNESS BEFORE DAWN

"Nothing can stop the advance of America or prevent a return of prosperity. We have hardly done more than start the great work that lies before us."

tion and helped make politics the most disreputable of existing professions. Impractical principles have been fostered and the public mind confused. Factions have fought and cursed each other while the country has slid rapidly on to ruin.

Truly it has been a day of distorted business ethics and mental debauchery. A time of weak leadership, procrastination and groveling submission to selfish forces and out-of-date principles. Let us send thanks to High Heaven that there are irrevocable natural laws which eventually bring every movement to a final end. Let us be thankful that action follows reaction, expansion follows contraction and

the gratification of normal human desires follows their undue repression.

If our legislators cannot immediately end their bickerings and establish a unity of thought and purpose, the President must quickly declare the present moment a time of national crisis and proceed to exercise the emergency powers vested in him by our constitution. This will per-

mit the instant creation of an advisory council, non-partisan in character, that will exercise wartime powers. Such action will have the backing of the entire nation, for all well-informed people now understand that only drastic remedial measures can restore confidence and prevent a disastrous upset in our nation's life.

Any further continuation of today's fears and follies would soon force us off the gold standard, cause the railroads to be taken over by the government, bring about the closing of the Stock Exchange and a debt moratorium, inaugurate a dole, and introduce into our life many measures foreign to our cherished principles. [TURN THE PAGE]

NEW!

THE HYPO OUTFIT YOU'VE ALWAYS WANTED



**With a live rubber tray...one that protects
the contents against breakage when dropped
...prevents spilling when overturned.**

Now the makers of VIM products have given the medical profession a new and modern Hypo Outfit—one it has long wanted. The new VIM gives you freedom from breakage and spilling...a thin, convenient case...sturdily built...that fits easily into the pocket.

In place of clumsy metallic clips or fasteners you get a live rubber tray. One that holds tight indefinitely—with nothing to repair or replace.

This rubber tray absorbs the shock if dropped...prevents damage to the contents. It holds contents tight even when the case is tipped upside down.

Easily sterilized, without removing the syringe or needles. Put the live rubber tray into the sterilizer—or the entire case, removing only the vials. No other Hypo Outfit has such a combination of advantages—thin, strong...with bulkiness eliminated. The new VIM gives you an outfit that fits easily into your pocket. And new freedom from petty annoyances of older type outfits.

Examine this new and improved VIM Outfit at any surgical instrument dealer—or order it subject to return if it is not all we claim it to be. The price is \$5.50.

Just ask for the New VIM Hypo Outfit with the contents cushioned in live rubber—protected against breakage and spillage—with no metal parts to loosen—nothing to replace or repair. And know that this thin pocket-size case will last you a lifetime.

MacGREGOR INSTRUMENT COMPANY

Needham, Mass.

But let us get clearly in mind the truth that nothing, whatever it may be, can stop the advance of America or delay for long the return of prosperity in our land. Even if we have to go ahead with new leaders, new practices and a new system, progress will be resumed. God has given us a greater share of nature's essential resources than are possessed by any other people. We have hardly done more than merely start the great work that lies before us.

Work will be provided for idle hands. For instance, let us turn our eyes to new and promising fields of enterprise. Take first the infant plastics industry. Here is an activity that eventually will touch practically every other business. It means the production of millions of useful articles turned out in huge quantities through the use of metal molds and hydraulic presses. Things that formerly took days to create may now be formed in one operation in a few seconds. These articles run all the way from pen barrels, buttons, and furniture, to lipstick holders, steering wheels and imitation marble.

The enthusiastic leaders of this industry are predicting plastic automobile bodies and frames, as well as entire molded airplane frames and wings. Since the introduction of the casein plastics, practically every button factory in the United States has adopted this material.

One large chemical company is developing a new resin secured from natural gas that is finding an immediate and profitable use in the plastics field. Through the use of this material it is now possible to manufacture phonograph records that are several times the normal length.

What is coming in the near tomorrow is beyond imagination. Hydrogen for use in many industrial processes will be obtained

at a very low cost from powdered coal. Liquefied helium, now being produced in greater quantity, is being employed for the study of the effect of very low temperatures on the properties of matter. New knowledge in this direction will greatly benefit many important industries. The production of a pure grade of lime from oyster shells is becoming a flourishing business.

Ocean water will gradually become an immense source of chemicals. Already one company is securing from the sea a bromine that is useful in the manufacture of anti-knock compounds for motor gasoline.

Chemistry is changing our entire industrial picture. A new compound injects "pep" into motor oil and speeds up its distribution throughout the mechanical system. A safe and powerful explosive has just been produced from natural gas. A process has been perfected whereby a fine grade of artificial rubber is obtained from limestone, coke, and ordinary salt. The purity of helium gas has been increased three per cent, and this means that the airship Akron has an increased lifting power of more than 12,000 pounds.

Cottonseed, once entirely useless, can now be made to yield high-grade gasoline as well as salad oil. A new source of rayon has been found in that waste product of the sugar-cane industry, known as bagasse.

The dawn of a new day and a new order in American life and business is immediately at hand. Out of today's chaos will come unity of thought and action that will restore industry to normal. War emergency measures will put an end to the bickerings in Congress and the selfish moves now being made solely for political purposes, and then alert eyes will at last discover that we are surrounded by unparalleled opportunities begging for attention.



Thank You Doctor

The baby is doing splendidly and Tom and I are so pleased.

When you first told me that Junior would have to have bottle feedings I thought I was due for a lot of trouble and work because I remembered what a time my sister had when her baby was on the bottle. She sent for a formula that was advertised to be recommended by many authorities, but something went wrong. She used to spend hours in her kitchen mixing this, that and the other thing. And in spite of all her trouble, her baby fretted and cried and didn't gain properly.

This S.M.A. you have prescribed for my baby is a new one to me. In fact, I have never seen it advertised. But, believe me, it works like a charm and it is *so* simple to prepare —no fuss or bother at all.

Junior reaches to take the bottle right out of my hands and drinks it all up. And he's the *best* child. Al-

ways happy when he's awake, and sleeps the whole night through.

And talk about a picture of health! I believe he would take first prize in any baby contest.

I'm going to bring him down to your office Wednesday as you suggested. That S.M.A. folder you gave me says even a breast fed baby should be under the supervision of a physician and I think myself that it's better to *keep* the baby well than to wait until trouble starts.

We certainly want to thank you for bringing our baby along so well, Doctor. It increases our confidence in you as our family physician. Tom has already "said it with dollars", but I wanted to thank you personally, too.

And I'm going to persuade Mrs. Brown,—that's my neighbor with the baby that's not gaining—to come along on Wednesday so you can prescribe the proper diet for him too.

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S.M.A. was developed at the Babies and Children's Hospital of Cleveland and is produced by its permission exclusively by S.M.A. Corporation.

S.M.A. is the only antirachitic breast milk adaptation a food for infants—derived from tuberculin tested cows' milk, the fat of which is replaced by animal and vegetable fats including biologically tested cod liver oil; with the addition of milk sugar, potassium chloride and salts; altogether forming an antirachitic food. When diluted according to directions, it is essentially similar to human milk in percentages of protein, fat, carbohydrates and ash, in chemical constants of the fat and in physical properties.

S.M.A. produces results more simply and more quickly produces excellent nutritional results more simply and more quickly and is a dependable automatic aid in preventing rickets and spasmophilia. It was offered to the medical profession in 1925 in response to a definite demand created by results and it has steadily won wider and wider approval.

S.M.A. has Not only is S.M.A. advertised and sold ethically according to the previously accepted standards of ethics, but in addition, from the very

beginning every package of S.M.A. has carried this bold statement:

"Use only on order and under supervision of a licensed physician. He will give you instructions."

However, we submit S.M.A. to your careful consideration primarily because it will help you produce excellent nutritional results in most cases and produce them more simply and more quickly, and not merely because it is sold in an ethical manner. **Trial supply of S.M.A.** Because offered without charge S.M.A. has won favor under typical conditions we are quite willing that you should try it in your own practice and under your own control. To make this easy we offer you a generous trial supply without charge or obligation. Simply attach the coupon to your prescription blank or letterhead.

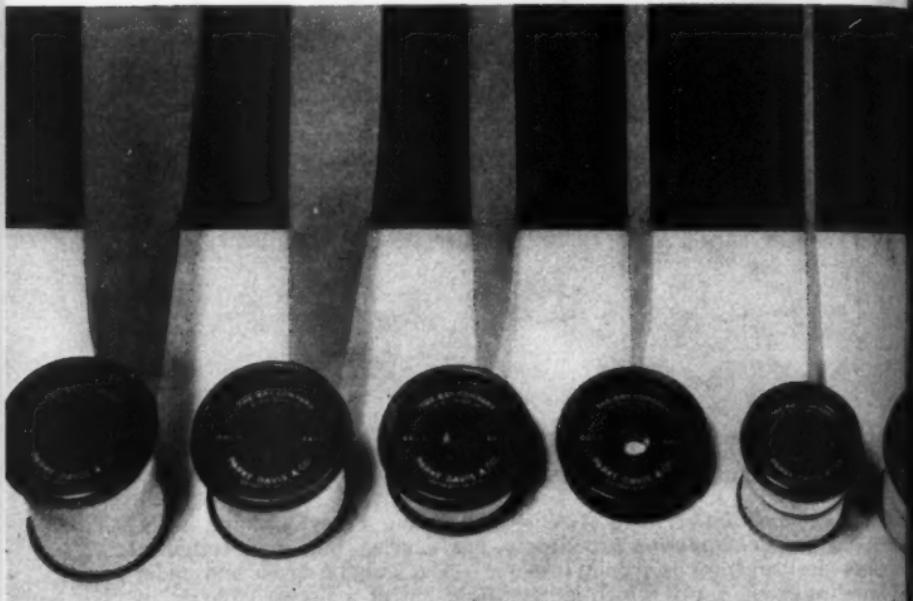
S.M.A. Corporation, 4614 Prospect Avenue
Please send me: Cleveland, Ohio

- Trial supply of S.M.A. 2-72
- New S.M.A. prescription pad.
- Fourth revised edition of "Milk Allergy" Booklet a resume of current literature on milk allergy with information concerning Smaco Hypo-Allergic Milks.

Attach coupon to prescription blank or letterhead.

SURGICAL **BAY'S** DRESSINGS

FREE REELING IN EVERY NEEDED WIDTH
from eighth to three inch strips



Easier to unwind and easier to keep clean, BAYHESIVE is available in all needed widths in the Bay free-reeling, dust-proof container. Your dealer has it. A sample is yours for the asking.

THE BAY COMPANY
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A DIVISION OF
PARKE, DAVIS & CO.

THE BAY COMPANY, Bridgeport, Conn.

Gentlemen: Please send me a sample of BAYHESIVE.

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the cluttered desk

ORGANIZED visiting nurses in New York City are agitating for more home care of the sick, as a means of lightening the expensive load on hospitals. They have asked Dr. J. G. William Greff, Commissioner of Hospitals, for a \$250,000 appropriation to provide better service by the visiting nurse units.

Students in schools of pharmacy who, midway in their course, decide to become physicians, face a loss of time because most states do not allow a degree in pharmacy to act as credit for entrance in a medical school.

The School of Pharmacy of St. John's College, Brooklyn, N. Y., has revised its courses to include the necessary 64 units of academic courses required for medical school entrance. The state has agreed to accept the 64 units at full value.

The St. John's course covers four years, five days a week, gives enough academic units to count for two years' credit in a university.

Ruling adopted April 11 by the Comitia Minora of the Medical Society of the County of New York:

It is resolved that, with the exception of certain narcotic preparations intended for internal use, the issuance by any physician of any prescription in secret code be held to constitute *prima facie* evidence of illicit financial relation between the physician and the pharmacist involved in the transaction and of the solicitation, demand or acceptance of a rebate or commission for the reference of the patient with the prescription to the particular pharmacist.

First woman to be appointed surgeon in the U. S. Public

Health Service is Dr. Estella Ford Warner. A specialist in child-hygiene work, Dr. Warner will travel over the country studying methods in child health work, suggesting improvements.

Before building that new house or office, send forty cents to the Superintendent of Documents, Government Printing Office, Washington, D. C., for the following:

How to Judge a House: Furniture—Its Selection and Use; House Insulation—Its Economies and Applications.

These three booklets were prepared by the National Committee of Wood Utilization, which was organized in 1925 by Herbert Hoover, then Secretary of Commerce. Their potential savings to the house buyer or builder is immeasurable.

Working against the *complete-health-examination-by-your-own-doctor* idea is the "free health service" offered by most life insurance companies to policyholders. The service usually consists of an annual urinalysis, by mail.

The worst thing about this "service" is the fact that it sets up false ideas about the nature of a health examination. The man who gets an imposing report from his insurance company saying that he is apparently okay, is led into a feeling of false security. That is only the beginning of a cycle of false values. Others, hearing of the service, wonder why a private doctor should ask \$15 or \$25 for a health examination which can be obtained by mail for nothing.

In the end medicine would be better off if the companies would



Reed & Carnick Introduce

Toniçine

A reconstructive
gonadal tonic

TONICINE combines an efficient gonadal hormone with the added tonic effects of strychnin and glycerophosphates. Toniçine represents the entire hormonal activity of the sex glands, and is prepared in two forms, for male and female respectively, to avoid the irrational practice of combining ovary and testicle in the same preparation.

Tonicine is of definite value as a general tonic and reconstructive. It is especially indicated in asthenia, anorexia, convalescence from illnesses, hypogonadism, and neurasthenia.

Toniçine Female contains, in each fluid dram, hormones representing fresh ovary 5 grains, strychnin sulphate 1/200 grain, and sodium glycerophosphate 1 grain.

Toniçine Male contains, in each fluid dram, hormones representing fresh testicle 25 grains, strychnin sulphate 1/200 grain, and sodium glycerophosphate 1 grain.

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London, E. C. I.

July, 1932

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give their policyholders something resembling an adequate examination. That, at least, would uphold the standard, maintain the health examination in a respectable status.

Our apologies to Architect Raphael A. Nicolais, for omitting his name as designer of the attractive Vermontshire Medical Building, page 59, June MEDICAL ECONOMICS.

Collectors of current books written on the *pity-the-poor-consumer* doctrine (first and best-known being Stuart Chase's "Your Money's Worth") may not consider their exposé bookshelf complete unless they have a copy of T. Swann Harding's "The Joy of Ignorance," published by Wm.

Godwin Inc., 100 Fifth Avenue, New York (\$3.00).

Mr. Harding does here to certain public traditions and popular buying customs, what he did to physicians in his earlier book "Fads, Frauds, and Physicians"—except that the present volume is less heavily documented, consequently more interesting to the average reader.

The following back numbers of MEDICAL ECONOMICS are wanted, to complete a permanent file in the New York Public Library:

January 1924 (Vol. 1 No. 4)
August 1924 (Vol. 1 No. 11)
July 1925 (Vol. 2 No. 10)
January 1926 (Vol. 3 No. 4)
February 1926 (Vol. 3 No. 5)
April 1926 (Vol. 3 No. 7)
May 1926 (Vol. 3 No. 8)
June 1926 (Vol. 3 No. 9).

—H. S. S.

A way to improve collections?—



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I'm Still Writing

A REPLY TO DR. MARKEY

By Harry M. Robinson, M.D.

WHAT is it that raises a man to a throne, and gives him the sublime privilege of uttering dicta from which no one may appeal? What is it that gives him a right to discourage his fellow men in their upward climb to the sun?

To me, it seems a pity that so many attempts should be made to discourage worthwhile effort, whether it be in "the writing game" or elsewhere.

In his article "To doctors who want to write," in May MEDICAL ECONOMICS, Dr. J. J. Markey gave this advice: "Don't try to break in on the writing game. Try to break in a little more enthusiastically on the medical game!" In this article, Dr. Robinson "breaks in" on Dr. Markey.

If it does nothing else, this will at least keep the market in pencils and paper moving.

I feel sorry for the fellows who are discouraged by the denunciation and "wet blanketing" of other writers farther up the ladder.

Personally, I have written a few medical articles and am now teaching my branch of medicine. At the same time, I find a few moments now and then when I don't care to work, and don't even care to read. In these moments, for my own pleasure, I throw together lines and verses.

Do I care whether George Bernard Shaw or Dr. Markey approve my efforts, or whether the stuff is "big time" material?

Not on your life!

It tickles me. I think it is much better than lots of stuff I have seen; and, after all, that's what counts. Even Shakespeare himself could not stop me.

I feel sorry for the doctor-author who is annoyed by having aspirants show him their efforts. He doesn't know it, but they are paying him a big compliment—certainly a bigger compliment than he deserves.

They consider him a god, to be revered, whereas he is merely a climber like themselves—only more fortunate.

Some unknown writes a novel, a few short stories, and maybe an essay or two. For one or several reasons these efforts catch the popular fancy. Immediately, the author becomes a professional entity, a being apart, and smiles disdainfully upon the rest of the poor mortals who wish that they could do likewise.

Becoming convinced that the gods have set him apart from his fellow beings and that he has been born a novelist or poet, he forgets his own struggles and aspirations, and reaches the conclusion that he alone (or maybe one or two others) has attained a position in the sun.

Now, as a matter of fact, nobody has ever yet found out what it is that makes the tyro a god. In view of that fact, it seems to me that those who have arrived or think they have arrived might, in merciful consideration, permit others a stab at the target.

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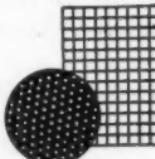
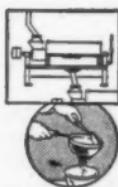


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Stay Ashore!

THAT'S MY ADVICE, AS AN OLD SHIP'S DOCTOR

By G. F. Campbell, M.D.

WHAT to go to sea? Want to be a ship's doctor?

If you do, and are sitting there in your office dreaming of the freedom and refreshing joy of a sea voyage, just remember—*there's a catch!* Ten to one you will feel so sick that you will be little inclined to enjoy yourself; or, what is just as likely, the need of having to stay below in the stuffy dispensary will not allow you sufficient time.

Many of us do not know how well off we really are in our snug office and plush-lined coupe. We do not stop to appreciate the comforts and peace that surround us in the old home town; nor the fact that the heroic little woman who bears the gaff may also have dreams of which she knows better than to speak.

The term *ship's doctor* has for some obscure reason been an ominous one for years. That is why those who bear the title have at times suffered such downright mishandling.

I know from my own experience that there has been too much of a mad scramble for the job without regard to its shortcomings. If onerous and humiliating conditions become apparent, or if the steamship company or its underlings rub salt into the wounds to self respect and pride, thereby causing the doctor to step out and make a change for himself—who cares? A flock of his professional con-

freres, lured by "the spell of the sea," swarm into the gap and try to grab the job without inquiry or question.

If doctors were only a little less indifferent to ordinary business precautions, they would hesitate to take a job just anywhere, or from anybody, without first making proper inquiries.

The average pay is about \$150 per month, although on some boats the doctor has to depend upon his fees alone. In instances where the company pays a salary, both crew and passengers are cared for free of charge. In either case, the compensation is



"There has been...a mad scramble for the job...without regard to its shortcomings."



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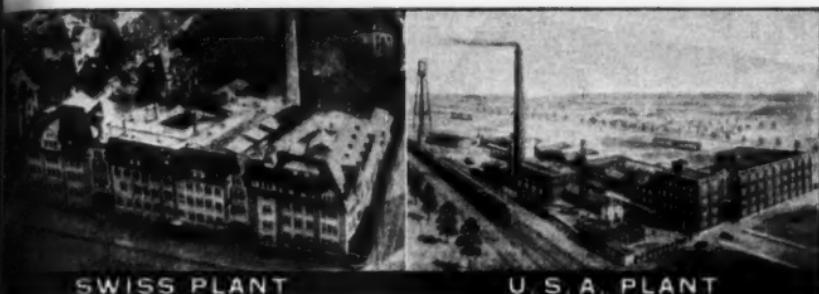


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54 No Judged

Their Favorable Verdict Has Developed A Small Swiss Laboratory Into The International House of Wander

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Nations Have the Merits of Ovaltine

Branch establishments scattered all over the globe cater to the demand for Ovaltine from the people of 54 different countries of the world.

Ovaltine was originally intended as a food for invalids—one which could be tolerated, digested and assimilated in spite of impaired nutritive function. The soundness of this conception seems to

be justified by the present worldwide acceptance of Ovaltine, not only as a food for invalids and convalescents but for nervous and rundown conditions, for growing children, for nursing and expectant mothers and for the aged.

Originated years before our modern knowledge of food values was developed, it is perhaps remarkable that the composition of Ovaltine, as originally formulated nearly 40 years ago, is still in accord with the principles of modern dietetic science.

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apt to be inadequate, and compares unfavorably with that of the physician in civil practice.

As in other public service, there exists a general worry lest the ship's doctor should not have enough work to do to keep him in trim. Accordingly, little extra tasks are thought up for him, such as holding services on Sunday (the captain's job), helping pay off members of the crew (the purser's job), conducting inspections (the mate's job), and performing other functions—even to that of official embalmer.

Only two types of physician as a rule will take this job or hold it for any length of time: the down-and-outer, or the man who has a real love of seafaring life combined with a desire to help his fellow humans.

Accommodations provided for the physician at sea are frequently inadequate. In my own case, for example, as surgeon on a well-known "palatial liner," the cabin set aside for my sleeping quarters and dispensary lacked portholes, was located way below in the center of the ship just under the dance floor, and teemed with mosquitoes and roaches.

Conditions being what they are, the seekers for money, glory, or a future will not find them in this job of ship's doctor. Ordinarily, those who stumble into it get little sleep, no leaves of absence with pay, no vacations, no hope of steady work, no increases in salary, no chance for promotion, nor any of the things that make for success and a life worth living.

It so happens that a qualified ship's surgeon is one of the great assets a company can have. Many people take sea voyages for their health; and if those who run the steamships would advertise that they have competent physicians aboard, it is likely that more advantage would be taken of the opportunity for recuperation which a long ocean

voyage affords.

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voyage always affords the traveler.

Lest, after all this, you consider me a destructive rather than a constructive critic, I suggest that marine doctors form a union or association designed to attain the following ends:

1. Permanent employment after suitable examination and probation;

2. Proper rank and promotion (junior doctors to be given two stripes; senior doctors three stripes; and fleet or supervising doctors, four stripes);

3. A living wage (no dependence upon tips or fees; salaries to be in keeping with the average professional compensation);

4. Suitable and sanitary quarters, enabling the doctor to get needed rest away from the dispensary;

5. An eight-hour shift;

6. Larger liners to carry two doctors or more as needed, and every freighter to carry at least one doctor for long voyages;

7. Activities to be restricted to professional work only, including the performance of such additional duties as sanitary inspections, fumigations, health talks, etc.;

8. No doctor to be ordered off one ship for duty on another, except in grave emergency, when his own ship will stand by;

9. A term contract or permanent commission with suitable notice, except in cases of insubordination or wilful misconduct;

10. No doctor to take the place permanently of another where his predecessor has suffered injustice or cruelty, until a board of arbitration has passed judgment;

11. A definite standard of education and ethics, including adequate post-graduate study.

*

Want to go to sea? Want to be a ship's doctor? If you still do, my advice is to wait until it becomes a better job than it is today.



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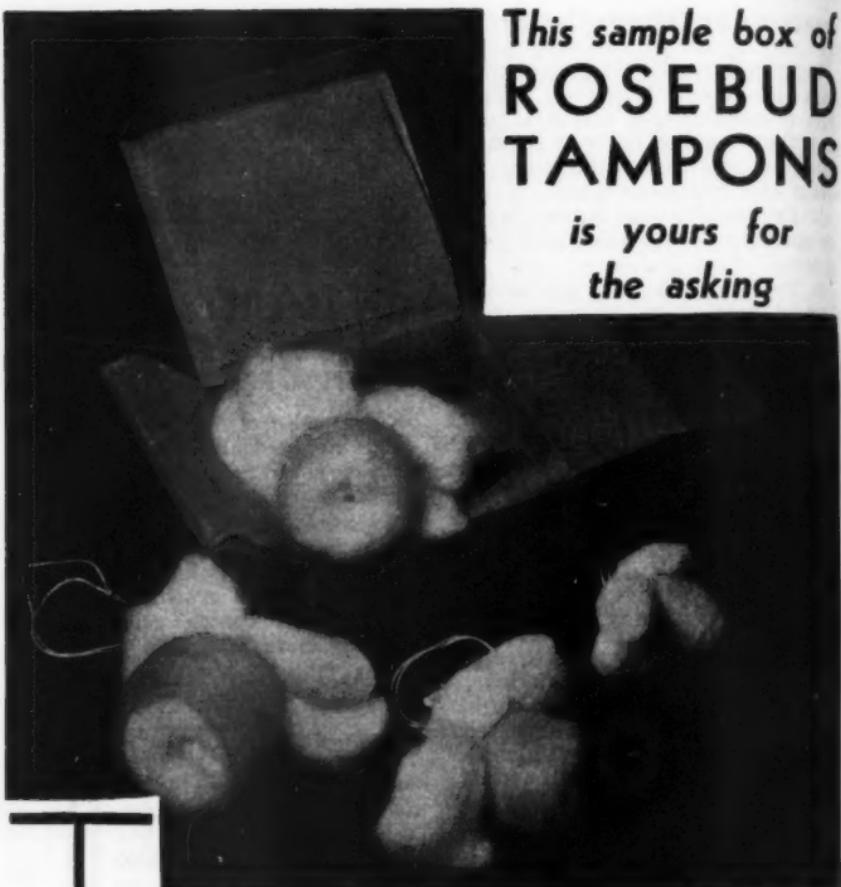
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Series of Prescriptions in the Medical
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various Secrets in Physick yet known; and
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it a Spurious Product from the Universal
Book of Experience.

A 2

The illustration at the left is a facsimile of the dedication page, "Pharmacopoeia Bateana."

17th Century Medicine

By H. G. Bull, M. D.

TWO and a third centuries ago, when "The Most Serene and Mighty Monarch, William III" was "King of England, Scotland, France and Ireland," a courageous medicus named William Salmon, flew in the face of convention and adverse criticism by translating into vulgar English the previously sacred Pharmacopoeia Bateana, without doubt the foremost book of the day that dealt with the healing art.

The preface assures us that Dr. Bate was "a man who in his Station had been Physician to Two Kings of England and a Protector: and of such approved skill in his Profession, that to make any Descants thereon, would be to draw a Vail over his Lustre, and blemish that Excellency, which in the following Work, gives a convincing Proof, that he was one of the greatest Masters of his Art in the Universe."

It speaks of his pharmacopeia as "A valuable Production which exceeds in its Benefit, and Usefulness to Mankind (we speak it without flattery) all the Dispensaries this day extant in what Language soever."

This translation was, indeed, a courageous act, for, at the time of its undertaking, medical formulas were for the large part secret and sometimes sold for a good price, as witness Dr. Goddard's Drops, the secret of which cost King Charles the Second the pretty sum of several hundred pounds.

Dr. Salmon attempts to justify himself before any disgruntled members of his profession by showing them that, in making this valuable dispensatory available to those able to read only English and no Latin, he is disclosing what by many of them



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LIRON CAPSULES

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A treatment by mouth with
LIVER EXTRACT.

iron, copper and arsenic.

In Liron, that fraction of fresh beef livers shown to be effective in stimulating red blood cell production in secondary anemias, has been extracted, concentrated, and standardized. With it is included iron and copper to increase hemoglobin.

Liron also contains arsenic in appropriate dosage for its effect on cell nutrition through the blood and lymph, and because of the apparent selective action between arsenic and the cells of the liver.

Four capsules, three times a day gives the equivalent of fresh liver, 4 oz., iron 1-1/3 gr., copper 1/20 gr., arsenic 1/5 gr. Supplied in bottles of 100 and 500.

Further facts, as well as prompt shipments, may be had from any of these Breon offices.

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had been considered inviolable secrets. Although this would seem to us to be an agreeable arrangement with which even the most fastidious should be satisfied, we come to a final justification of his rash act at which not even his bitterest enemy should cavil:

XX. I know that I have many Enemies in this World, and that publishing this Work will create me many more, and those powerful ones, and malicious too; but I have overlooked all this, and have directed my Eye to the Recompence of Reward. If herein I have serv'd my Country and Generation, I have what I aim'd at, and I am sure I shall have along with it the Blessings of the Poor and Needy, and the Defence of Him, whose Mercies are over all his Works.

Lond. 7. Dec. 1693 W. Salmon

A score of years before this—in 1674 to be exact—appeared the first printing of a play by another William, yclept Shakespeare, in which a certain “Triumfeminate of Wierd Sisters” brewed a stew so potent that it unseated all discretion in the brain of the head of the House of Macbeth, eventually bringing it down, from cellar to chimneypots, in utter and ignominious ruin.

These two contributions to English literature, the Bate's Dispensatory and the witches' brew, may at first thought seem to be as far removed from each other as the poles; yet even a casual perusal will disclose the astonishing fact that they have much in common! Amazing substances move with all respectability down the gullets of the sick, and there is hardly an ingredient of the cauldron that does not have its counterpart in this “small Work possibly the Greatest of its Kind, for Excellency and Usefulness, that ever any age produced.”

Let us begin then, as the witches did, with the ugly and venomous toad, and wend through the astonishing mazes of the greatest witch scene in all playdom, starting with *A Collected Summary of the Choicest Secrets of Physick yet known*.

ONE

*Toad, that under cold stone
Days and nights has thirty one
Swelter'd venom sleeping got,
Boil thou first i' the charmed pot.*

Well, here are our toads. The very first preparation in chapter one, “Of Pouders”—perhaps given this priority because of its popularity and importance—is the *Pulvis Ethiopicus*, or Black Powder. If you care to try it, here is a verbatim copy of the prescription:

Rx Live Toads, no. 30 or 40, burn them in a new pot, to black Cinders or Ashes, and make a fine powder. Dose $\frac{1}{2}$ dram, or more in the Small-pox, &c. and is a certain help for such as are ready to die: some also commend it as a wonderful thing for the cure of the Dropsie . . . It prevails also against Cancers, being given for some time inwardly, and outwardly applied to the Ulcer: it absorbs the corrosive Acid, and destroys the Malignity.

Or perhaps you are a fastidious person and prefer your toads in oil:

Oleum Bufonum, Oil of Toads.
Rx 4 Live Toads, boil them in 2 lbs. of Oil-Olive for one hour, or till they break: then strain and keep it for use.

No mention is made that the toad “wears yet a precious jewel in its head”, but we come to jewels later.

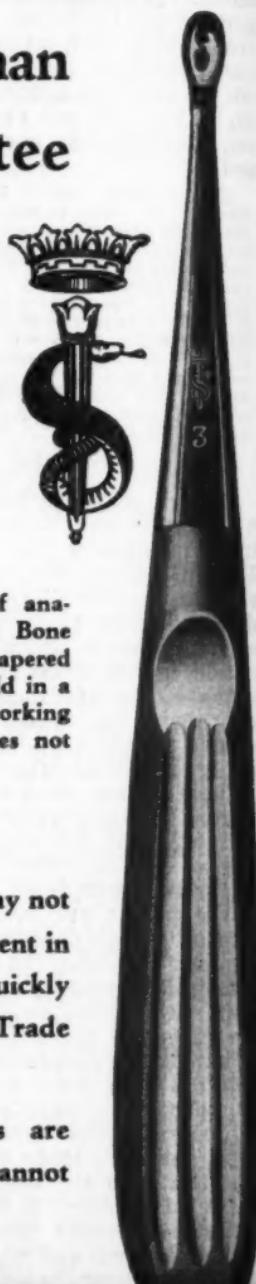
TWO

*Fillet of a fenny snake
In the cauldron boil and bake.*

In this connection our *Collected Summary of the Choicest Secrets in Physick yet known* has several preparations to offer. The venomous viper is the most signally honored of the fenny snakes, and appears in the sickroom as a powder, an oil, a wine, or what-have-you. Those afflicted with “the Impetigo, or Gouty Tophs, or even the Leprosie” (which apparently held no terrors for an altruistic viper anxious to do some good in the world) were privileged to use *any* or all of the following exquisite preparations—probably all—for the author specifies that they must be taken

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The reproduction of the crown, staff and serpent which appears on all Kny-Scheerer Instruments is a guarantee of precision and quality. It tells you that the instrument you hold in your hand possesses carefully studied features of design and manufacture.



In the manufacture of Curettes, the question of anatomical conformity is watched very closely. In Bone Curettes especially, the back of the spoon is so tapered that the instrument will engage the bone when held in a vertical position. This provides a more efficient working angle for the surgeon and a position which does not obstruct his field of vision.

This and other equally important features may not be apparent at first glance. But they are present in every Kny-Scheerer Instrument and can be quickly verified if you will look for the Kny-Scheerer Trade Mark before you buy.

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580 Fifth Avenue, New York, N. Y.

"for a long time, except it be fortified with some of the Volatile Salt of Toads":

Oleum Viperarum, Oil of Vipers

Take 3 large, fat, live Vipers, 2 ounces of Spanish Wine, 8 oz. of Oil of Hypericon, put them into a vessel with a narrow mouth, boil to the Consumption of the Humidity, and then press forth the oil.

Vinum Viperarum, Wine of Vipers.

Rx 6 Live Female Vipers, gathered in the Spring time, best Spanish Wine, or Canary, 6 lbs., digest them without heat for six months, then strain out for use. Some make it by digesting the Vipers excoriated (and casting away the Bowels, Heads and Tails) in the Wine aforenamed for some days. It is a most celebrated thing against the Leprosie, the Elephantiasis, Barrenness, Plague, &c. and prolongs Life. Dose 3 or 4 ounces twice a day for some considerable time.

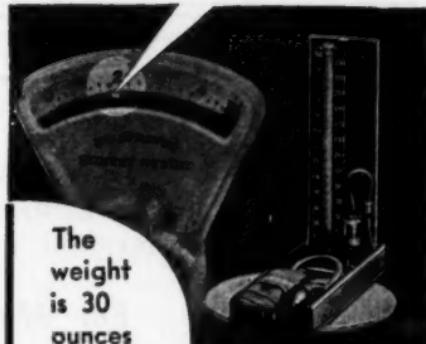
Now, doubtless, there were occasional retractable cases of leprosy, elephantiasis, or even of barrenness, which did not improve to any noticeable extent on "3 or 4 ounces twice a day for some considerable time." But how could one be certain that in a season of a good deal of leprosy, or let us say, of barrenness, the viper-catcher might not have gotten a little careless and, in his anxiety to augment the supply of viper wine for all these poor sick people, neglected to question his viperfolk as to their sex?

There is another factor which seems to enlarge to an alarming degree the probability of error in the making of this great Arcanum. Suppose the vipers were not all "gathered in the Spring time?" And as to the best Spanish Wine, or Canary,—well, perhaps, Caligula-like, the less said of that the better.

THREE

*Eye of newt and toe of frog,
Wool of bat and tongue of dog.*

Of course, it must be acknowledged that the 1690's were a long time after Macbeth's day, and progress in the gentle art of "Physick" was to be expected. So, whereas the toe of the frog seems to have been enough for



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One of the most eminent authorities on Materia Medica and Therapeutics in America says: "My favorites are plain mineral oil and the cascara-agar preparation known as Regulin."

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Please send sample and literature of Bromidia.

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the wierd sisters, Dr. Bate would be content with nothing short of the whole amphibian, as witness his

Oleum Ranarum, Oil of Frogs.
Made by boiling 12 Live Frogs for one hour in 1½ lbs. of olive oil.

He does not state whether the frogs remain alive for the entire hour. Translator Salmon adds that "...it is a good thing for the Intention, but in my Opinion [the capitals are his] Oil of Toads is much before it, to all the purposes mentioned." Some of which, it might be mentioned in passing, are "Redness of the Face, Impetigo, Erysipelas, and Gangrene." Would that we had such a remedy in our day!

But with this inevitable progress in medicine, why stop at a dog's tongue? Here is a preparation, *A Decoction Against the Biting of a Mad Dog*, which, for its fidelity to the theory that *similia similibus curantur*, might easily be the very cornerstone of homeopathy. In making it, a choice is offered the hesitating physician of adding to a decoction of rue, garlic, London Treacle and tin filings in ale, either the powder of the liver of a mad dog or, better still, the volatile salt of the whole animal, which has "never been known to fail." (If that is not a proud record, what is?)

This volatile salt was made from "the whole animal, being killed [perhaps there were anti-vivisectionists in those days too], then cut into thin bits and thoroughly dried, and at last distilled by retort."

A pleasant place to spend a summer afternoon, one of these apothecaries' shops, especially during the drying season!

FOUR

Adder's fork and blind-worm's sting,
Lizard's leg and howlet's wing.

The adder's fork and the lizard's leg may be said to be pretty well included in the "Live Female Vipers gathered in the spring time," and we find many uses for the humble blind-worm, assuming that here is meant the common earthworm. This plentiful creature, whose usefulness, except for the sport of angling, is now considered to lie in preparing the earth to receive the rain, was offered to the public in many disguises. And well, for not a few well-brought-up British subjects might have hesitated to take them as-was; worms are always more popular going than coming.

Worms were available in wine, or as a powder, or a syrup or an oil; but for the wine, it was of the first importance to procure "Live Earthworms having a red Circle on their Necks," and these made "a noble Diuretick"—which does not seem in the least surprising. Wine has been known to do the same, without the aid of red-necked earthworms.

Some of the comments of good old Doctor Salmon regarding these earthworm preparations leave no doubt as to their nature: "The *Oyl* is fetid, and stinks so abominably, that it is scarce possible to be used alone, especially unrectified." And of the wine he remarks, "It is a nasty unpleasant Medicine and doubtful whether it has the Vertues ascribed to it." (Doctor, Doctor, this is heresy!) Assuming, however, that he was a pessimist in this exceptional instance, for in most

A True Cholagogue—Prescribed for Over 20 Years

R **TAUROCOL**

Samples and full information on request.

THE PAUL PLESSNER CO. - - - - -

DETROIT, MICH.



Civilization
Has found us
Embarrassed
with thirty feet or so
of food canal
Well adapted
For prehistoric days
Of irregular meals
With much
Useless material
In the menu.

And so, *constipation*
Became a disease
Of civilization.
But the same civilization
Has provided
The remedy—AGAROL.

Gentle and effective
As only a good
Mineral oil
Emulsion
Can be.
It lubricates
And softens;
And also stimulates
The tract.
Palatable
Beyond complaint;
Suitable
For adult or child.
Agarol truly is
The modern answer
To the problem
Of constipation.

★

Would you try it
And be convinced?
Just write—and soon
A package will be
On the way to you.



Agarol is the original mineral oil and
agar-agar emulsion with phenolphthalein.

AGAROL for Constipation

WILLIAM R. WARNER & CO., Inc., 113 WEST 18th STREET, NEW YORK CITY

cases he is anything but, a patient might be willing to put up with these slight unpleasantnesses.

The manner of preparing the following concoction is so remarkable, and illustrates so well the pains that these old alchemists went to, that I am tempted to quote it in full:

LXIV. Sal Volatile Corvi, Volatile Salt of Ravens.

1. Rx. A whole Raven gently dried, chop all into bits, (Head, Bill, Feathers, Claws, Bones, and Intrails) and put them into an earthen retort, or a glass well-coated, which fix in a Reverberatory Furnace, with a large Receiver, luting well the Juncture.

2. Distill first with a very gentle Fire to warm the Retort, and bring forth the Flegm drop by drop; when all that is come over, augment the fire a little, and the acid Spirits will come, filling the Recipient with white Clouds.

3. Encrease the fire now to the third degree, so will you have a blackish fetid Oyl, with a volatile Salt sticking partly to the neck of the Retort, and partly to the sides of the Receiver; encrease the fire to the highest degree, and continue it till no more will come forth.

4. Shake all well together in the Receiver, to loosen the volatile Salt, and put all (Flegm, Spirit, Oyl, and Salt) into a Matrass or Bolthead with its Alembick and a small Receiver, luting the Joints with a Bladder wet in the Glair of Eggs.

5. Distill in Sand in a gentle heat, so will the volatile salt ascend pure and white to the top of the Vessel, which separate and keep in a Glass close stopt for use.

6. The matter remaining in the Matrass filter through brown Paper, so will the flegm and Spirit pass, leaving the fetid Oyl at bottom.

7. The spirit you may rectify by a glass Alembick in B.M. drawing off the one half thereof; which is the volatile acid Spirit replete with volatile Salt, casting the other half away.

And that's that! The last cause in paragraph seven leads to the observation that they were not always so wasteful with the other half, as witness: "In preparing the Martial Metal of Antimony," the directions say "The Curd being settled, decant the clear Liquor (which keep to wash Bedsteads with to preserve them from Bugs)."

Continued in August MEDICAL ECONOMICS.

**When your patients
are**

"HEAT IRRITABLE"

When the nature of their ailment means added comfort from hot weather—chafing, pruritus, hyperemia—irritation physical or mental—prescribe

Tyree's Antiseptic Powder

Two teaspoons to a pint of water as a soothing healing lotion or douche, and for relief from summer penalties, bites, stings and abrasions.



This booklet, you know, is sent to Doctors for their patients—50,000 have been used so far by physicians—Do you need any?

J. S. Tyree Chemist, Inc.

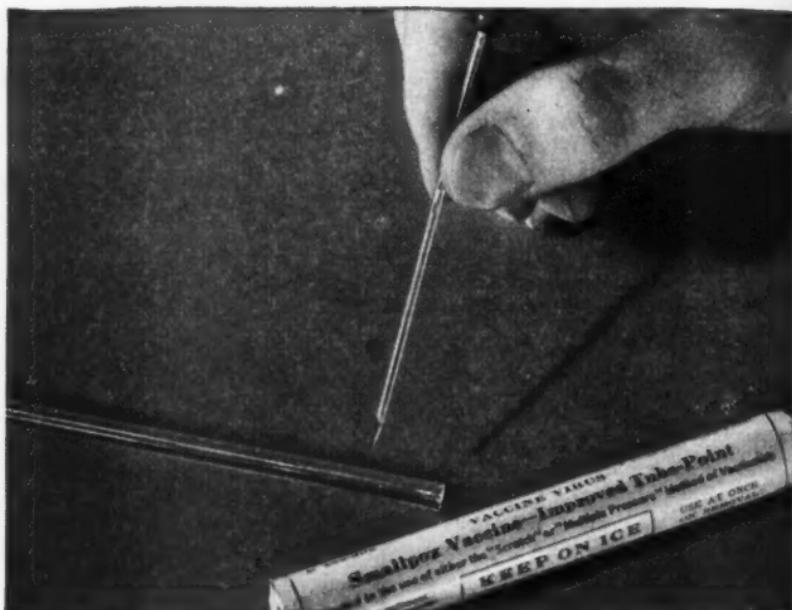
Washington D. C.

Yes, please, sample of Tyree's Antiseptic Powder and.....booklets.

M.D.

Street

City and State



VACCINATE AGAINST SMALLPOX THIS IMPROVED WAY

SPEED and greater safety are brought to smallpox vaccination through the Mulford Improved Capillary Tube-Point—a sterile, sealed vaccine container and inoculating instrument all in one.

This unique time-saving container is ready for immediate use with any of the approved techniques—multiple-pressure, puncture, or scratch.

And, of course, it contains Smallpox Vaccine Mulford—another reason for its use. Here is a vaccine which delivers a high

percentage of "takes"...which is uniform and reliable...which always carries assurance of potency and purity, because exhaustive tests are carried out on each lot before release...and which is backed by over 30 years' continuous experience and research. It is a product you can rely on.

• • •
SMALLPOX VACCINE MULFORD is available in the following packages:

Capillary Improved Tube-Points—Single's and Ten's.
Capillary Tubes—Ten's.

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The Doctor and his Investments

[FROM PAGE 31] during his lifetime his income is augmented by 7% and he is enabled to enjoy his declining years in comfort. Another man with total funds of \$15,000 decides, at the age of 65, that the 5% yield he is getting from his securities is not enough. He cannot meet expenses on \$750 a year, so he signs an annuity contract to pay him \$1,620.15 annually for the remainder of his life.

•

To meet the need of persons who favor the life annuity but who do not wish to sign away their principal, the *refund annuity* was created. The income from this type of contract is naturally smaller than that obtainable from a straight life annuity; nevertheless, it is admirably suited to those cases in which the annuitant has dependents to whom he wishes to have any unpaid balance returned after his death.

Among leading insurance companies it is the custom to pay each holder of a refund annuity a monthly income for as long as he lives, with the additional understanding that if, at the time of the annuitant's death, the aggregate of payments made by the

insurance company does not equal the total investment of the annuitant, the payments will be continued to a designated beneficiary.

Hence, while the annuitant may, if he survives long enough, receive from the insurance company far more than he deposited with it, he can never receive less.

Example: Suppose that a certain physician aged 33 elects to pay his insurance company \$600 annually for a refund annuity. For this, he will receive, when he attains the age of 60, a monthly income of \$149.82. Furthermore, he can arrange for his wife to receive the refund annuities due in the case of his premature death.

The last of the three principal annuity types is the *joint and survivor annuity*, found desirable under conditions where there are two persons to be considered. This contract which provides for payment of the income for as long as either one lives, is often indicated for the physician and his wife who have neither children nor dependents. It makes no difference whether the husband or the wife dies first, since the income is paid during the entire lifetime of whoever survives longest.

Example: Assume that a physician and his wife, aged 65 and 60, respectively, wish an annuity of this nature. If they pay \$13,580 in advance, they may have guaranteed to them an annual in-

MICAJAH'S MEDICATED WAFERS

are at their fiftieth milestone, marking a half century of successful use. Proved convenience and definite superiorities over the vaginal douche and fountain syringe have made them the choice of physician and patient alike in the treatment of inflamed conditions of the vaginal tract, cervical erosion, vaginitis, relaxation of tissue, and

LEUCORRHOEA

Soothing. Healing. Non-irritating. Styptic. Tissue-toning. Tissue shrinking. Prolonged in action. Full information with samples to physicians on request.

Write today.

MICAJAH AND COMPANY
198 Conewango Avenue,
Warren, Pa.

Micajah's Suppositories

Assure comfort and conveniences to patients suffering from even severe rectal troubles. Action is soothing and prolonged. Does not wear out in effect. Prescribed by physicians in cases of fistula and proctitis, and

HEMORRHOIDS

Micajah's Suppositories meet the important indications for such treatments. Physicians! Samples and full information upon request. Don't miss this offer.

Write today!

Chronic Anorexia

**nearly always accompanied
by HYPERACIDITY**

"**GASTRIC** analysis, which we have carried out in a great many of these patients, always shows a high total hyperacidity . . . Constipation, it will be found, is usually associated with the anorexia . . ."

CHARLES GILMORE KERLEY
MEDICAL JOURNAL AND RECORD

In the treatment of children who cannot or will not eat, pediatricians and general practitioners find Phillips' Milk of Magnesia a real help.



First, for its positive alkalinizing action. Phillips' Milk of Magnesia has been recognized as a standard antacid for more than 50 years. A given quantity neutralizes almost three times as much acid as a saturated solution of sodium bicarbonate, and nearly fifty times as much as lime water.

Second, for its mild laxative action. It is particularly suited to children's requirements in this respect—mild, easy and non-habit-forming.

Wherever an acid condition is evident, either in children or adults, you may prescribe Phillips' Milk of Magnesia, sure of its dependability as an alkalinizing agent.

ALSO IN CONVENIENT TABLET FORM

Phillips' Milk of Magnesia is now available in convenient tablet form. Each tablet is equal to one

teaspoonful of Phillips' Milk of Magnesia. Children especially like the fresh, delightful mint flavor.

PHILLIPS' Milk of Magnesia

Prepared only by The Chas. H. Phillips Chemical Co., New York, N. Y.

come of \$1,000 for as long as either continues to live.

After it has been determined what kind of an annuity shall be purchased, the next question is "What method to use in paying for it?" Generally, the annuity is paid for either in a lump sum, or by means of annual installments.

The first of these, or *single premium plan*, is especially favored by physicians who desire to invest large, lump sums. Units of \$1,000 or multiples thereof, obtained as professional fees, gifts, or bequests are always acceptable for the purpose.

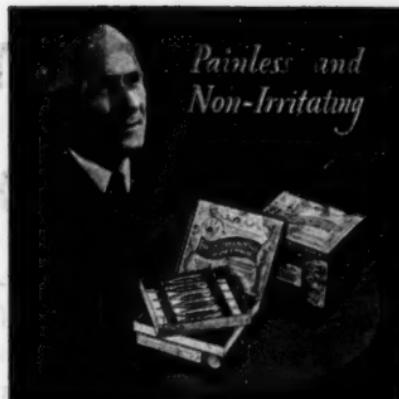
This form of contract guarantees the payment of a regular income beginning between the ages of 50 and 70, with proper provision for a death benefit should the annuitant die prematurely. In addition, there is placed upon the annuity an increasing cash surrender value.

The second, or *annual premium plan*, of purchasing annuities finds its greatest appeal among salaried and professional men who wish to set aside periodically a certain portion of their income for use in later life. Deposits under this plan may be made annually, semi-annually, or even quarterly, and in amounts usually of \$100 or multiples thereof. A strong stimulus to regular saving is thus afforded, and a portion of one's earnings during the most productive years of life is safely "tucked away" for future enjoyment.

Up to the time the annuity begins, it is customary for the insurance company to pay dividends on each of its annuity contracts. These dividends may be

1. Withdrawn in cash, or
2. Left on deposit at interest.

If they are left on deposit, their annual yield will usually be in the vicinity of 3%. Accumula-



*Painless and
Non-Irritating*

Thousands of millions of dollars worth of
iron injections have been given.

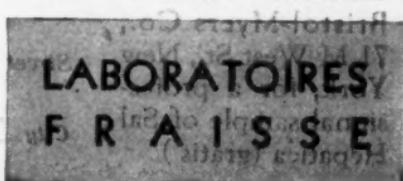
In man, iron is a property of the hemoglobin of the blood, and of the white blood cells. It is also believed to be a component part of all protoplasm. Lower the iron index of any of these and there is an impairment in the functioning of the human economy.

It is conceded that hypodermic injection is the ONLY RIGHT METHOD of introducing iron into the system.

When administered in the form of Ferruginous Comp. Ampoules (Fraisse), absorption is complete and the effect is very rapid.

Although there are on the market many imitations of this ampoule, it is the exclusive Fraisse method of manufacture which makes Ferruginous Comp. Ampoules (Fraisse) non-irritating and practically painless.

E. FOUGERA AND CO., INC.
75 VARICK ST., NEW YORK



An Aid in Reducing High Blood Pressure

INTESTINAL toxemia is frequently met with in cases of hyperpiesis. This toxic condition reduces the capacity of the liver to anabolize certain nitrogenous wastes and the resulting accumulation raises blood pressure.

When hyperpiesis exists in these cases, patients may have few manifestations usually associated with it. All, however, have one common characteristic—constipation—which is the cause of the toxemia.

Many physicians have found Sal Hepatica the most beneficial preparation in correcting intestinal toxemia. Even for protracted treatments it can be prescribed regularly without causing toler-

ation. It flushes the intestinal canal and so removes waste materials that produce putrefaction and the toxic effect. In so doing, Sal Hepatica is a recognized aid in reducing high blood pressure of toxemic origin.



* Sal Hepatica *

**MEMO to my
assistant:** Send to
Bristol-Myers Co.,
71 M West St., New
York, for a profes-
sional sample of Sal
Hepatica (gratis)

Name _____ M. D. _____

(Please enclose card)

Street _____

City _____ State _____

tions of dividends may, as a rule, be withdrawn in cash on any anniversary, or used upon retirement to augment the annuitant's income.

Whether the doctor subscribes to the annual premium plan or to the single premium plan, his investment is always protected should he die before his guaranteed income payments start. An annually increasing amount is allowed as a death benefit under the usual annual premium plan if he dies before the annuities become effective.

•

It is interesting to note that the average annuity has a consistently increasing cash surrender value before the commencement of annuity payments begin.

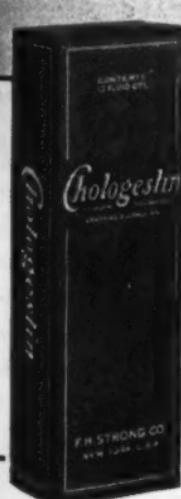
The amount of the annuity for which preparation is made depends upon the age of the annuitant at issue and the age at which he decides his annuity shall be-

come payable. The greater the age chosen for retirement, the larger the income.

Just at present, no annuity is subject to Federal income taxation until such time as the annuitant has received in annuities a sum equal to the total purchase price.

The physician 60 years of age who signs a life annuity contract will receive on his investment a yield of over 9% annually in most instances. When he attains 65 years of age, his income is paid at the rate of almost 11%, at 70 he receives nearly 13%, and at 75 and over, almost 16%.

All that is needed to purchase an annuity is the money, for no medical examination is required. Thus, any physician, regardless of the state of his health, should find exactly what he wants after an examination of the annuity contracts offered by our more representative life insurance organizations.



3 Good Reasons

You should try *Chologestin* in disorders of the biliary tract.

CHOLOGESTIN produces a natural flow of free uninterrupted bile.

CHOLOGESTIN aids in restoring the efficiency of intestinal digestion.

CHOLOGESTIN acts as an intestinal antiseptic in case of putrefaction and fermentation.

Write now for a free sample!

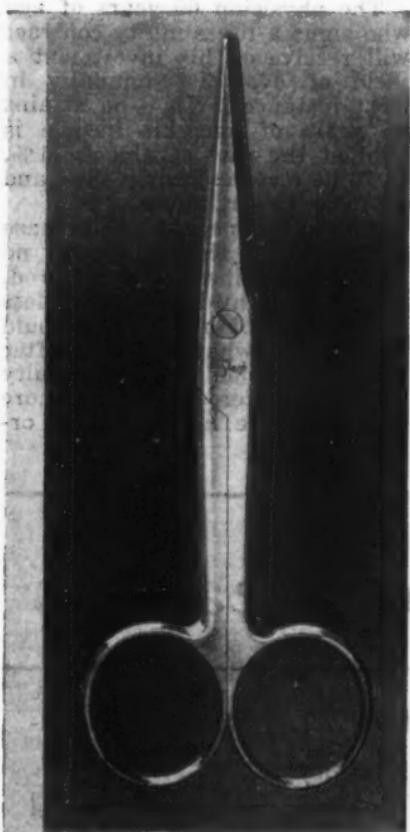
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I'd like a sample of **CHOLOGESTIN** and **TABLOGESTIN** (tablets of **CHOLOGESTIN**); and **DIET LISTS**, please.

M.D.

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BARD-PARKER RENEWABLE EDGE



Above: 6½" Dissecting, straight, stainless steel . . . \$4.75.

PRICES: Bard-Parker Renewable Edge Scissors, stainless steel—\$4.25 to \$5.25 according to size and pattern. Renewable edges, package of 3 pair—50 cents.

SCISSORS (Stainless Steel)

REQUIRE NO REGRINDING

A familiar principle is responsible for this revolutionary improvement in surgical scissors. The cutting edges of Bard-Parker scissors are easily replaced with new keen edges eliminating costly and unsatisfactory regrinding. New edges are uniformly sharp assuring perfect cutting performance.

Since there is no grinding wear on the shanks, Bard-Parker scissors far outlast ordinary scissors, effectively cutting down replacements. The original cost of Bard-Parker stainless steel scissors is low. You will find them not only less expensive to buy, but more economical in upkeep as well, due to the renewable edge feature.

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369 Lexington Avenue, New York, N.Y.

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SAMPLES OF UNGUENTINE: An informative report, proving the antiseptic, germicidal and penetrating action of Unguentine, with free physicians' samples, is offered by The Norwich Pharmacal Co. (ME Item 7-32), Norwich, N. Y.

DOCTOR'S HAND BOOK ON PRINTING: Here is a complete résumé of the physician's stationery problems. It includes specimen pages of appropriate faces and a comprehensive list of stationery items used by physicians, with charges. Offered gratis by The Printery of Lindsay Laboratories (ME Item 7-32), 21 Ashland Place, Brooklyn, N. Y.

SAMPLES OF SIMILAC: Literature describing the action of this infant food, with samples for clinical trial, is offered physicians, writing on their prescription blank, by M & R Dietetic Laboratories, Inc. (ME Item 7-32), Columbus, Ohio.

NELSON NEW LOOSE-LEAF SURGERY: A 32-page booklet, describing a new type of surgical reference work, with companionate services, is offered by Thomas Nelson & Sons (ME Item 7-32), 21 Fourth Ave., New York.

TIME-TESTED AND TRIAL-PROVEN THERAPEUTIC AGENTS: This practical booklet on the action and methods of use of Micajah's Medicated Wafers and Micajah's Suppositories, with samples of both products, is offered by Micajah and Company (ME Item 7-32), Warren, Pa.

SAMPLES OF BLONOR: This product is said to add materially in reducing and affording relief of symptoms of high blood pressure. For samples write: Falcon Chemical Company (ME Item 7-32), 429 Penn Ave., Pittsburgh, Pa.

SAMPLES OF ZONITE: A sample bottle of Zonite, with concise literature explaining its uses and effects, is offered physicians, writing on their prescription blank or letterhead, by Zonite Products Corporation (ME Item 7-32), Chrysler Bldg., New York.

SAMPLES OF S.M.A.: A trial supply of S.M.A., the new S.M.A. Prescription Pad, and a copy of "Milk Allergy," are offered physicians, writing on their prescription blank or letterhead, by S.M.A. Corporation (ME Item 7-32), 4614 Prospect Ave., Cleveland, Ohio.

STRAINED VEGETABLES IN INFANT FEEDING: This booklet is of

particular interest to the pediatrician and general practitioner. It contains information on 16 varieties of prepared baby soups and vegetables. For a copy write: Harold H. Clapp, Inc. (ME Item 7-32), 1347 University Ave., Rochester, N. Y.

A NEW MODALITY IN THE TREATMENT OF SYPHILIS: This folder which gives full particulars regarding Bi-Na-Gluconate, a new Bismuth preparation in colloidal state, may be secured from The Drug Products Co., Inc. (ME Item 7-32) 26-32 Skillman Ave., Long Island City, New York.

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SAMPLES OF BROMIDIA: A trial supply of this well-known sedative, with literature, is offered by Battle & Co. (ME Item 7-32), St. Louis, Mo.

STRAINED VEGETABLES IN THERAPEUTIC DIETS: This booklet will assist any physician to make his patient's diet more varied. For a copy write: Lillian B. Storms, Ph.D., Dept. of Nutrition, Gerber Products Company, (ME Item 7-32) Fremont, Mich.

SAMPLES OF WYETH'S SURGICAL POWDER: A supply of this new surgical dressing, which is said to promote healing and relieve skin irritations, is offered for personal test. Write: John Wyeth & Brother, Inc. (ME Item 7-32), 1118 Washington Ave., Philadelphia, Pa.

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A New Surgical Dressing

Promotes Healing • Relieves Skin Irritation

WYETH'S SURGICAL POWDER

Combines proven antiseptic, analgesic and astringent properties in a well-balanced surgical dressing.

Indicated as an external application in the treatment of skin eruptions, wounds, ulcers, and as a first-aid application in minor and major surgical cases.

Wyeth's Surgical Powder relieves soreness and pain, and aids the healing process without suppuration.

Supplied in sprinkler-top can in two sizes—a miniature size for the emergency bag and a regular size for clinic and hospital use.

Let us send you a supply of Wyeth's Surgical Powder for a personal test.

JOHN WYETH & BROTHER, INC., PHILADELPHIA AND MONTREAL



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 Bismuth
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JOHN WYETH & BROTHER, Inc.,
1118 Washington Avenue, Philadelphia, Pa.

Dept. M.E. 7

Gentlemen: Please send me supply of Wyeth's Surgical Powder for personal test.

Dr. _____

Address _____

Dept. Standard Brands, Inc. (ME Item 7-32), 691 Washington St., New York.

SAMPLES OF TRENT: A trial supply of this product for mouth hygiene, packed in individual envelopes, each containing the right amount for a single treatment, is offered by Trent Laboratories, 307 Central Ave., West (ME Item 7-32), Cleveland, Ohio.

SAMPLE OF ORTHO-GYNOL: A free package of Ortho-Gynol, for vaginal hygiene, with booklet, is available to physicians upon request to Johnson & Johnson (ME Item 7-32), New Brunswick, N. J.

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IRRADIATED MILK: A reprint from the Journal of Biological Chemistry discussing the energy requirements for antirachitic activation. Write: Dry Milk Co. (ME Item 7-32), 205 East 42nd St., New York.

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SAL HEPATICA: A professional sample will be sent to any physician enclosing his card. Write: Bristol-Myers Co. (ME Item 7-32), 71 West St., New York.

ANTIPHLOGISTINE: Literature and professional samples are offered by The Denver Chemical Mfg. Co., 163 Varick St., New York.

CHOLOGESTIN: Samples of this product, for use in disorders of the biliary tract; also samples of Tablorestin (tablets of Chologestin), with diet lists, are offered physicians by F. H. Strong Co. (ME Item 7-32), 160 Varick St., New York.

TYREE'S ANTISEPTIC POWDER: Samples of this product, with copies of the booklet "Personal Matters of Import to Women" (for distribution to patients) may be had by writing J. S. Tyree Chemist, Inc. (ME Item 7-32), Washington, D. C.

THE FOOD VALUE OF FROZEN EVAPORATED MILK: This instructive paper, by E. A. Louder and L. S. Smith, in the Journal of Dairy Science, is available in reprint form, by writing the Evaporated Milk Association (ME Item 7-32), 208 North Wabash Ave., Chicago.



MARVOSAN FOR FEMININE HYGIENE

MARVOSAN is an ethical preparation—safe, harmless, and effective. It can be used alone, or with any type of diaphragm. MARVOSAN is the approved clinical vaginal jelly of

DR. JAMES F. COOPER
with the addition of oxyquinolin sulphate, forming an intensely powerful, yet safe and non-irritating vaginal antiseptic which retains its potency and eliminates douching.

Send coupon for liberal supply of MARVOSAN for clinical use.

TABLAX COMPANY, ME-7
32 Union Square, New York, N. Y.
Send GRATIS, clinical supply of MARVOSAN and literature.

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LIKE A SPIDER
enmeshes a fly
in its web

EFEDRON
(HART)
enmeshes the
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HAY FEVER

Subject it to a
clinical test!

Send for FREE
Tube—TODAY

HART DRUG CORP..
35 S. W. 2nd St., Miami, Florida.
Please send me trade size tube
of Efedron free.

..... M.D.



Hot weather . . . causes diarrhea, vomiting, dehydration and lowered resistance. This is the time to be SURE about the baby's nourishment. Dryco lends itself to the requirements of the season.

(Diarrheal diseases in infancy and childhood are the cause of more deaths in early life than all of the infectious diseases combined.)

Dryco is the choice of thousands of physicians in difficult diarrheal cases. It is unsurpassed as a transitional food since it can be prepared to suit all degrees of solutions and concentrations demanded by the weakened digestion of the sick baby. The baby can be fed under reduced volume and with a highly digestible food without overburdening the stomach or overhydrating the system.

With the increased vitamin D content of Dryco, babies are protected against the dangers of rickets and avitaminosis.

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DRYCO

Made from superior quality milk from which part of the butterfat has been removed, irradiated by the ultraviolet ray, under license by the Wisconsin Alumni Research Foundation, (U. S. Patent No. 1,680,818) and then dried by the "Just" Roller Process.

COUPON

Please send special reprints: *Diarrhea—Summer Complaint; Acute and Habitual Vomiting in Infants; Irradiated Milk in the Treatment of Rickets*: The Dry Milk Co., Inc., Dept. ME, 205 East 42nd St., New York, N. Y.

ALL DRYCO IN THE HANDS OF DRUGGISTS IS IRRADIATED

Toting Hospital

[FROM PAGE 34] by hand-made clips of S-2 aluminum alloy sheet (.030 thick), are parked an electric otoscope, its head, hypo case, bottle of alcohol, two army sizes of cotton, a cellophane bag for tongue sticks and applicators, tube of kosmoplast, and few rolls of bandages or whatever you.

There is also a hunter's headlight, running on flash cells, costing two or three dollars at Uncle Sam's, worth a hundred where's a perineorrhaphy to do, by light of a smoky barn lantern, vastly better than having some nervous yokel try to keep your flashlight pointed where needed.

Altogether, we find this bag, as the old German said about sauerkraut, "handy to have in the house in case of sickness"; but obtaining one is not so simple. Four years ago I tinkered up the first one myself, a bungling job, yet far more satisfactory than any bag I had found. The original becoming about worn out, I tried to get the new one done in more workmanlike shape; but leather workers and bag makers in five states snickered and passed the buck.

Finally, on a visit to Nashville, Tennessee, two bag houses independently suggested a saddle maker (seeing I must ride my hobby!) by the name of Swaggerty, on Lower Broadway—207 I think it was—who did, indeed, enter most heartily and practically into the spirit of the undertaking, and without any gold-digging either.

Much difficulty had attended the finding of a suitable microscope, one weighing ounces instead of pounds. Even early correspondence with B. & L. failed to divulge their pocket microscope, all aluminum, to 360 diameters, 11 ounces. It is highly satisfactory for identify-

for THE IRRITABLE BLADDER

*Whether true Cystitis,
Cystalgia, or following
Surgical Intervention—*

and

*For Tenesmus and Burning
Sensation on Micturition*

SANMETTO

soothes, relieves, promotes repair and gives the patient much needed rest.

Note: Sanmetto is the only product of its kind made step by step from the original crude drugs. Substitutes, extemporaneously made, cannot give Sanmetto results.

Samples on Request

**OD PEACOCK SULTAN
COMPANY**

St. Louis, Missouri

IT'S A GOOD OLD FRIEND to every DOCTOR

— AND HERE IT IS
*refined to a new
degree in—*

Puretest

There are few physicians who, in the course of their practice, do not find use for Epsom Salt. In the class of saline evacuants it has no peer.

The great objection to Epsom Salt has always been its crudity, its lack of refinement.

In Puretest Epsom Salt, this valued drug reaches a new standard of purity and refinement. The United Drug Co., makers of Puretest, have set specifications which far exceed U.S.P. requirements.

The result is, an Epsom Salt with an absolute minimum of impurities and fines. Greater solubility. Uniform white needle crystals. In short, a salt



HOW *Puretest* EXCEEDS U. S. P. REQUIREMENTS . . .

1. IN LESSER AMOUNTS OF CHLORIDES, HEAVY METALS AND OTHER IMPURITIES.
2. IN SUPERIOR, UNIFORM APPEARANCE—DAZZLING WHITE NEEDLE CRYSTALS, WITH MINIMUM OF "FINES."
3. IN NUMBER OF REACTION TESTS.
4. IN NUMBER OF, AND CARE IN SAMPLING TESTS.
5. IN SPEED AND COMPLETENESS OF SOLUBILITY.

of the same dependable action, but more acceptable to your patients. All Rexall and Liggett Drug Stores have Puretest.

Puretest Epsom Salt

UNITED DRUG CO., Boston, Mass.

Laboratories at Boston, St. Louis, Toronto and Nottingham, England

ing pus in urine or doing white count, thus offering most acceptable bedside evidence in the old, old argument of menstruation vs. appendicitis.

It is not satisfactory however, without addition of a diaphragm to control illumination, though but the feeblest mechanical skill is needed to drill a few holes in a disk of sheet aluminum and to tap it for revolving substage, as seen in cut. Garage man did mine.

The sad note is that this pocket microscope was discovered just as the model had been discontinued by the manufacturer. To close stock they quoted me this \$35 instrument for \$21.

Relying to my inquiry if I might quote this price, they say I may, only that they fail to see how I can make any money on it! They don't know we are not selling microscopes.

B. & L. have superceded this instrument with a cheaper one, the New Gem, which would be suitable if equipped with diaphragm and aluminum tripod like the pocket model, instead of the cast iron base with which the Gem was born.

Besides blood counts, the laboratory on board is equipped for routine urinalysis (except gravity), ferric chloride tests for acidosis, occult blood tests, sedimentation tests and blood matching ('raus mit type numbers so long as they match).

In the obstetrical bag 'longside there is a fairly fool-proof, one-man transfusion contraption, sterile and ready. (Did you ever face a furious hemorrhage from a rigid one-finger cervix, alone Out Yonder?)

The fitting out of the Toting Operating Room occupied another dismal period, ransacking surgical catalogs for a small emergency case suited to the needs of a woods practitioner in the year 1932. Kits of this sort mostly leap from the type glittering with historic armories of knives and scalpels, as used by



Vaginal Hygiene

One Fomos tablet, inserted close to the os uteri, disintegrates almost immediately and liberates a gas (CO_2) which diffuses the ingredients in a dense viscous foam, penetrating into every fold and crevice of the vaginal tract. Achieves complete antisepsis and correct form of feminine hygiene. Chemical and mechanical in its action. Healing. Soothing. Formula used by physicians for nine years.

FOMOS LABORATORIES, Inc., ME-7
207 Fourth Ave., New York, N. Y.

Send professional sample of Fomos, gratis.

Dr.

Address

Cystogen

A PIONEER IN URINARY TRACT INFECTION

Following its acceptance by the medical profession more than a third of a century ago, Hexamethylene Tetramine (methenamine) has strikingly been the choice urinary antiseptic in combatting bacterial activity along the course of the urinary tract.

Cystogen (hexamethylene tetramine) is a synthetic compound whose principal action is dependent upon the liberation of formaldehyde in acid media, particularly in the urine. The active nascent formaldehyde so produced inhibits and destroys bacterial activity without exerting any undue irritation upon any portion of the urinary apparatus, when administered in the ordinary therapeutic dosages.

- Cystogen (hexamethylene tetramine) is a synthetic compound whose principal action is dependent upon the liberation of formaldehyde in acid media, particularly in the urine. The active nascent formaldehyde so produced inhibits and destroys bacterial activity without exerting any undue irritation upon any portion of the urinary apparatus, when administered in the ordinary therapeutic dosages.

Your patient can secure Cystogen only on your prescription, since Cystogen is advertised only to the profession.

CYSTOGEN CHEMICAL CO.
220 36th ST., Brooklyn, N. Y. ME-7-32

Please send literature and samples of CYSTOGEN.

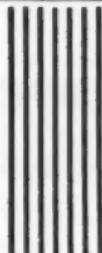
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Address

July, 1933

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MAZON SOAP

keeps the baby's tender skin free from ailments, removes impurities and is a remarkable skin stimulant.



Mothers Accept your advice for the proper maturing of their baby

From snuggling babe—through infancy—into childhood, the mother is ever caretaking in her cherished thoughts to mature a healthy, robust child.

One of her greatest concerns is the proper care of baby's skin—so susceptible to even the slightest irritation.

MAZON

offers a modern scientific treatment for infantile cutaneous lesions.

A mother's recent letter bears out our statement:

"My 5 months old baby has been troubled with Eczema on his face and head for some time. I tried several ointments but nothing seemed to help it. On April 6th, I consulted my doctor and after examining the baby he advised me to use Mazon together with Mazon Soap. I did and in 4 days my baby's face was entirely cleared up and is now as soft and smooth as any baby's."

MAZON

COMPLETE RAPID ABSORPTION
IMMEDIATE PRURITIC RELIEF
EASE OF APPLICATION
POSITIVE RESULTS
NO BANDAGING

THERE ARE NO SUBSTITUTES FOR MAZON

— PLEASE PRINT —
BELMONT LABORATORIES, Inc.,
4430 Chestnut St., Philadelphia, Pa.

M. E. 16

Please send me trial supply of Mazon and Mazon Soap.

Dr.

Address

City State

McDowell in his first oophorectomy, to others violently modernized by nine dollars worth of Bard-Parker.

Conventional but pathetic items in these catalog assemblages include Methuselah's ear spoon (instead of tiny ring curette to go through infant ear speculum); "male and female" catheter (of just what use when rubber balks?); probes (why is a probe?); one lone hemostat of bulldog breed; a so-called needle holder, but no needles to hold, nor sutures; but, anyhow, an *eye knife*. So thoughtful, the latter!

We bucolic doctors never know when we might wish to do an emergency cataract operation.

•

In my reply to a questionnaire from Sklar, I recently waxed disdainful and facetious on this matter of emergency kits, when to my consternation they took me seriously, assembled a case exactly according to my grumblings, and even wanted to name

the thing after me. Talk about fame!

Leastwise, we got our small surgical case, containing besides items headlined in cut, an aluminum box for suture tubes, three mosquito hemostats; a trocar and canula that a 16-catheter just slips through (for ascites or closed empyema on child), applicator, tongue-tie-groove, the inevitable probes, tissue forceps, plain and toothed, a slip of a carborundum hone, an eye spud for foreign bodies, also a little magnifier of the linentester type, invaluable for seeing exactly where said spud is digging into the cornea with reference to ye furrin body.

With this little outfit, reinforced by some ether, hemostats and sterile linen from the obstetrical bag, one can, if need be, unscramble a strangulated hernia or a turbulent appendix Out Yonder, quite nonchalantly!

The country isn't such a bad place to practice.

R HAYDEN'S VIBURNUM COMPOUND "HVC"



ANXIOUS to avoid painful interruptions in her active life of work and play, the modern woman is grateful for an effective antispasmodic and sedative. Difference in price is negligible when you consider the difference in effectiveness. Be sure that your prescriptions are filled with the genuine HVC. It contains viburnum opulus, dioscorea villosa, and aromatics, and it is non-narcotic and leaves no unpleasant after effects. Samples to the profession on request.

Put up in 4-ounce and 16-ounce Bottles

Manufactured and Distributed by

**NEW YORK PHARMACEUTICAL CO.
BEDFORD SPRINGS, BEDFORD, MASS., U.S.A.**

MINERAL DEPLETION IN THE SUMMER



PAINFUL and disabling muscular cramps have long been associated with workers exposed to prolonged high temperatures. Haldane is credited with the suggestion that the condition is due to salt loss carried off in excessive perspiration.

In a similar manner, a form of acidosis is prevalent among patients during the heat of the summer months, which reduces vitality and is associated with summer diarrhoeal conditions, dermatoses, etc.

In addition to replacing the excessive loss of moisture by the drinking of increased quantities of water, the tendency to salt loss and acidosis may be conveniently offset by the concomitant use of BiSoDoL.

BiSoDoL, being a balanced formula, can be safely taken in routine dosage without the danger of setting up an alkalosis, and it offers a more rational method than the single alkali, of maintaining the alkali reserve.

The BiSoDoL Company
130 Bristol St. New Haven, Conn.

—• BiSoDoL •—

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Tours and Cruises »

FOR PHYSICIANS AND PATIENTS

ENGLAND AND WHY: This is one of the standard travel folders on England. The new edition includes an announcement of Round Tour Tickets, which, for \$2.60, give unlimited travel in any one zone for a period of seven days. Write: Great Western and Southern Railways of England, 500 Fifth Avenue, New York.

EL PASO, TEXAS: A standard file folder containing climatological data, a list of sanatoria and medical facilities, and other literature discussing the El Paso region from the health standpoint, and emphasizing its value as a center for tuberculosis patients. Write: The Gateway Club, Chamber of Commerce, El Paso, Texas.

MIAMI-HAVANA: Overnight service between these two ports, at surprisingly low rates, is described in a folder put out by the Clyde-Mallory Line, Pier 36 North River, New York.

MOTORING THROUGH ENGLAND AND THE CONTINENT: Complete data for those who desire to "do" Europe by automobile is offered by Europe on Wheels, Inc., 218 Madison Ave., New York.

SEE SWITZERLAND WITH A SEASON TICKET: Now you can buy unlimited travel over 3000 miles of rail and lakes, for a flat price, comparatively low. Get the announcement from the Swiss Federal Railways, 475 Fifth Avenue, New York.

TO CALIFORNIA BY THE ADVENTURE ROUTE: An attractive, 24-day cruise through the Panama Canal to California, with stop-overs in seven Central-American countries, is available for \$200.00, one way. Write: Panama Mail Service, Grace Line, 10 Hanover Square, New York.

IRELAND, GEM OF THE SEA: This guide book to the emerald isle is offered free by the Great Southern Railways of Ireland, 200 Fifth Avenue, New York.

TO EUROPE THE AMERICAN WAY: Any one of a fleet of modern, comfortably appointed American ships is ready to take you to Europe this summer. Decide upon the accommodation you desire, where you want to land, and communicate with the United States Lines, 45 Broadway, New York.

21 DAY CRUISES TO THE WEST INDIES: Ten stops in the Virgin Islands are made on these trips, listed in a folder issued by the Furness-Bermuda Line, 34 Whitehall St., New York.

AUTOMOBILE TOUR OF EUROPE AND THE BRITISH ISLES: Itineraries, rates, and complete information concerning this personally conducted automobile tour will be sent to prospective travelers by Pathfinder Tours, Inc., 1151 South Broadway, Los Angeles, California.

THE CHARM OF ENGLAND: This is the largest, most comprehensive free folder on England, that we know of. It contains 80 pages, covers all sections, and includes useful travel data. Offered free by the London, Midland and Scottish Railway, 200 Fifth Avenue, New York.

TOUR OF SOVIET RUSSIA: Literature describing a tour for physicians, arranged by special invitation of soviet medical associations, and including visits to Russian hospitals and clinics, is offered by the Hamburg American Line, 39 Broadway, New York. The line announces that one group of doctors is sailing in July, on the S.S. New York.

VACATION DAYS IN NOVA SCOTIA: An untrammeled region for a summer tour, easily reached from the Atlantic seaboard, Nova Scotia is going to be more popular in 1932. Write: Eastern Steamship Lines, Pier 18, North River, New York for their descriptive folder.

FLORIDA, THE BAHAMAS, AND CUBA: A reasonably-priced, 12-day, all-expense cruise is attractively presented in a folder issued by the Munson Steamship Lines, 67 Wall Street, New York.

[TURN THE PAGE]

DIRECT TO NORTHERN EUROPE: Sailing schedule and minimum passage rates from New York to Gothenburg, for 1932, have been announced in a folder published by the Swedish American Line, 21 State St., New York.

Who calls Spud

a cure for colds?

We don't. It's enough for us to call it a good cigarette! To point out that its menthol content leaves a cool, clean taste in the mouth...so that even people with colds or nose or throat troubles can appreciate its fine flavor.

Where your patients need advice about their ills or their smoking, we believe such advice should come from you. Your decision is best, because you know them and (we hope) you know Spud.

SPUD

MENTHOL-COOLED CIGARETTES

20 FOR 20c (U. S.)...20 FOR 30c (CAN.)

THE AXTON-FISHER TOBACCO CO., INC., LOUISVILLE, KENTUCKY

TO THE
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Tours,
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TO THE SOUTH SEAS: Sailings and fares of all-inclusive tours to Hawaii, New Zealand, and Australia, are listed in a recently issued folder of The Oceanic Steamship Company, Matson Line, 535 Fifth Avenue, New York.

CHINA-JAPAN RAPID EXPRESSES: Ferry service between Shanghai and Kobe, across Japan's inland sea, is told about in this Japan-printed folder put out by the NYK Line, 215 Market Street, San Francisco.

COLORADO: Everything worth seeing in the state is summarized in this booklet, with illustrations, offered by the Missouri Pacific, 13th & Olive Sts., St. Louis, Mo.

CANOE TRIPS IN CANADA: A series of four booklets, "Canoe Trips in Western Canada," "—in the Maritime Provinces," "—in Quebec," "—in Ontario," giving disinterested information for sportsmen, is offered by the National Development Bureau, Department of the Interior, Ottawa, Canada.

THE CALL OF THE MOUNTAINS: A large and elaborate book inviting you to a vacation in Glacier National Park, with an airplane map of the park. Write: Great Northern, St. Paul, Minn.

MEXICO ALL-EXPENSE TOURS: For itineraries of these 13 and 20 day cruises to Mexico write: Ward Line, Pier 13, East River, New York.

DUDE RANCHES: They are here by the dozens, listed geographically, with instructions for reaching them. Ask the Santa Fe, 1116 Railway Exchange, Chicago, Ill., for the Dude Ranch folder.

BOSTON-BERMUDA: A new service, with weekly sailings, is described in this leaflet issued by Canadian National Steamships, 384 St. James St., Montreal, Quebec.

SHORT EXCURSIONS ROUNDABOUT THE PHILIPPINE ISLANDS: Motor, train, and boat trips from Manila to the highspots of the Philippines. For a copy of the folder write: Philippine Tourist's Association, Manila, P. I.

AROUND THE WORLD

Oct. 16th to April 11th
MEXICO, CENTRAL, SO. AMERICA
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SOUTH SEAS, CAPE TO CAIRO
 Leaving mid January 1933
 Write for further information: Pathfinder Tours, 1151 S. Broadway, Los Angeles, California.

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The most distinguished address on the Pacific Coast
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BEVERLY HILLS CALIFORNIA

For more than 56 years Hires Root Beer—so delicious and wholesome—has been made by a slow, costly percolating process from the juices of roots, herbs, barks and berries. It takes weeks to make Hires Root Beer—whereas unnatural imitations can be made in a few minutes from cheap oil flavors.



HAS BEEN ACCEPTED

BY THE

COMMITTEE ON FOODS

OF THE

AMERICAN MEDICAL
ASSOCIATION

THE FIRST ROOT BEER

TO BE ACCEPTED BY THIS

PUBLIC-PROTECTING ORGANIZATION



**Hires
Root Beer
is a
Natural
Beverage**

I Stopped Knocking the Cults

[FROM PAGE 19] side source that, between my visits to the patient, the chiropractor was visiting her and giving her "adjustments."

Filled with righteous indignation, I informed the family at the time of my next visit that such practice would have to stop. While discussing the situation with the patient and her family, the head of the household asked me if I happened to know of a physician who had become famous by reason of the message that he had given to the world through the Gospel. I answered that I thought that he must have reference to St. Luke, and he said that St. Luke was the person he had in mind.

He then asked me how St. Luke had practiced medicine; if he had prescribed drugs, or if he had used some other method. I could not answer that question, and he then informed me that he had never been able to find any reference to St. Luke having given anyone a dose of medicine, and he thought that it was possible that he might have practiced the healing art through the office of prayer or through bodily manipulations.

I confess that I do not know, but I hate to think of St. Luke as being the ancient founder of chiropractic.

Nevertheless, I told the family that they would have to choose between the chiropractor and myself. They made their choice and I was not the one chosen.

Everything considered, I must admit that the above situation could hardly have been handled in a more untactful and clumsy

*There is only
ONE refinery-
sealed Castor
Oil in America
and that is . . .*

KELLOGG'S tasteless CASTOR OIL



**Reaches your patient fresh,
tasteless, odorless. Free from
after-nausea.
It's purity is sealed in.**

**SPECIFY "KELLOGG'S TASTELESS CASTOR OIL"
IN ORIGINAL BOTTLES**

**Walter Janvier, Inc.
121 Varick St. New York**



IMPLICIT CONFIDENCE

In introducing Ortho-Gynol, Johnson & Johnson are fully conscious of their responsibility to Physicians and their patients.

• Ortho-Gynol is distinctly the ethical and professional preparation for Vaginal Hygiene. As such, it merits your implicit confidence. So that you know the true efficacy of this new product, we have prepared a descriptive booklet for physicians which we shall gladly send to you with a full-size package of Ortho-Gynol.

Ortho-Gynol is a vaginal jelly with twofold action. Its base is a gum combination of unusual physical characteristics, which resists solution for several hours. It gives *mechanical protection*. And the antiseptic ingredients are recognized as entirely adequate for *chemical*

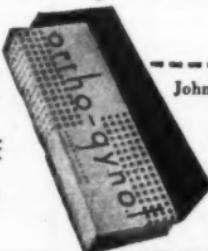
protection. Ortho-Gynol causes no irritation, nor does it interfere with natural functions. Its use is simple, non-revealing.

One application through the convenient nozzle remains effective for hours. This better preparation for Vaginal Hygiene possesses the additional background of intensive laboratory research and clinical proof of dependability.

Ortho-Gynol comes in lettered or plain packages. It is available through your pharmacist or regular supplier. If you have not already requested your complimentary package of Ortho-Gynol, please send for it.

ortho-gynol
APPROVED
FOR VAGINAL HYGIENE

Johnson & Johnson
NEW BRUNSWICK N. J. U. S. A.



Johnson & Johnson, New Brunswick, N.J.
Send me free package of Ortho-Gynol (value \$1.50) and booklet.

Dr. _____

No request honored except from the profession. 1-8

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manner. I lost not only a patient, but also a family of good people and caused them to turn entirely to the chiropractor for medical advice and treatment; whereas, up to that time, they had considered his "adjustments" merely as an adjunct to more rational medical therapeutic measures.

Similar situations have been encountered on a number of occasions since that time, and I have taken care to manage them in a different way. For a number of years my method of procedure has been about as follows:

If the patient is acutely ill, and I have reason to think that any unnecessary movement or manipulation would be detrimental to his well-being and to his chances for recovery—as, for example, in a case of pneumonia, acute cardiac trouble, or threatened peritonitis—I am frank to tell the family so. Nine times out of ten they have intelligence

enough to understand, and they do not insist on having the chiropractor.

On the other hand, if they do insist on the patient having chiropractic treatments, then I think that the only thing for the physician to do is to tell them that he cannot assume responsibility for the case. Yet, even under such exceptional circumstances, I do not think that the physician is justified in withdrawing from the case unless some other medical doctor will consent to take charge.

In spite of the meddlesome interference, and the possibility of the treatment causing serious results, the physician might be able to save a human life that might be lost if, without ceremony, he were to withdraw. So, under the circumstances, the physician should bend from his straight-laced attitude, swallow some of

NEPENTHE

Carminative, Anti-spasmodic, Sedative

A superior corrective of acute gastro-intestinal disorders, so common during the summer months. Composed of blackberry root, nutgalls, sodium bicarbonate, ginger and prickly ash bark, skillfully blended with choice aromatics.

Sample free to physicians upon request

Prepared only by

THE TILDEN COMPANY

Pharmaceutical Chemists since 1848

New Lebanon, N. Y.

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PROGYNON

TRADE MARK REG. U. S. PAT. OFF.

FEMALE SEX HORMONE

(ALLEN-DOISY STANDARDIZATION)

Clinical experiences show the definite value of
Progynon in the various ovarian dysfunctions:

- AMENORRHEA**
- MENOPAUSE**
(Physiological & Surgical)
- FRIGIDITY**
- STERILITY**
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- VOMITING AND NAUSEA**
- OF PREGNANCY**

Progynon Tablets—the only standardized effective sex hormone preparation for oral use.

Progynon Ampules—maximum efficiency—not reduced to the less effective crystalline state—freedom from unpleasant reaction.

Packages of 30 and 60 tablets of 30 Allen-Doisy units each. Boxes of 12 ampules of 25 Allen-Doisy units each.

Increased quantity—lower price



Full Information from
SCHERING CORPORATION
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75 West Street, New York, N. Y.
Please send full information about Progynon.

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his pride, and stay on the job, for who among us can evaluate a human life?

On the other hand, when I find that the patient desires supplemental "adjustments" by a chiropractor, and there is no reason for believing that these might be harmful to him, I generally tell him that it is *his back*, and if he wishes to have it punched, he is welcome to go ahead and have it done to his satisfaction. I also tell him that some member of the family or one of the neighbors can do it for him as well as anyone, but that if he wishes to spend his good money to have someone else do it, why, that is his affair.

If the matter is treated lightly by the physician, treated as being of no importance one way or the other, very frequently the family will also consider it of no importance and drop the idea. But, for the physician to deliver himself of a long vitriolic tirade against chiropractic and chiropractors, *is worse than useless!*

Many physicians have an idea that they are the guardians of the public welfare in all health matters, and that it is their duty to protect the public against the irregular practitioners. This is just another way of saying that the public must be protected against its own ignorance, and is in part true.

Yet the public has licensed these irregular practitioners and the laws of the several states protect, even encourage, them in their operations, and this is irrefutable evidence that public opinion demands that people be permitted to purchase the brand of service that these irregulars can furnish.

People cannot be forced or coerced into thinking and acting in a manner that we consider to be the right one. To educate people away from their prejudices and to new ways of think-

REPLACE YOUR LEAKY
VALVE WITH THE
NEW

AIR-FLO



CONTROL

FOR USE ON ALL
BLOODPRESSURE INSTRUMENTS

It is superior because of these
exclusive features:

1. Single Unit inside assembly.
2. "Floating" steel-to-brass needle point release.
3. Replaceable "snap-on" contact point.
4. One-piece body—no joints or washers to leak.

(At all surgical instrument dealers)

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W. A. BAUM CO., Inc.
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LIKE A SPIDER

enmeshes a fly
in its web

EFEMIST (HART)

enmeshes the
pollen causing

HAY FEVER

Subject it to a
clinical test!

*Send for FREE
bottle—NOW*

HART DRUG CORP.,
35 S. W. 2nd St., Miami, Florida.
Please send me free bottle of
Efemist.

M.D.

Colloidal Chemistry Is Succeeding Where the Usual Antacids Fail



THE objections to the ordinary chemical methods of treating gastric hyperacidity are well known. There is the danger of complete neutralization and consequent prevention of proteolytic digestion. Alkalosis, with its attendant symptoms, is likely to result. In addition, there is the probability of that secondary and more pronounced acid rebound of which physicians are well aware.

Colloidal chemistry has gone far to solve this problem. In ALUCOL, a colloidal type of aluminum hydroxide, has been found an effective means of overcoming these objections.

ALUCOL takes up excess acid by colloido-chemical adsorption, leaving a sufficiency to allow of the continuance of peptic digestion. It is non-toxic and completely avoids all possibility of alkalosis.

ALUCOL

(COLLOIDAL HYDROXIDE OF ALUMINUM)

Every physician interested in antacid therapy is urged to write for a trial supply of ALUCOL and full information

USE COUPON BELOW

THE WANDER COMPANY
180 North Michigan Avenue, Chicago, Ill.

Dept. M. E. 7

Please send me, without obligation, a container of ALUCOL for clinical test, with literature.

Dr. _____

Address _____

City _____ State _____

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ing is a slow process. Yet, if the members of the medical profession stand together and work to that end, something of good can in time be accomplished. Nevertheless, whatever type of educational warfare is to be waged, it must be directed against the system itself. It should not be a personal warfare of individual physicians against the individual members of that system or cult.

Many words have been spoken, and page after page has been written on this subject. Yet, after all, is it really worth while for the physician to rave and rant and tear his hair and push up his blood-pressure because of the situation?

The chiropractor is here today. Tomorrow he will be gone and some other irregular will be here to take his place. So it has ever been and so it is likely to continue to be. In the meantime, scientific medicine, like Christianity, is founded on a rock. *

So here, in this town surrounded by piney woods and cotton fields, the chiropractor and I get along. We cannot labor together in the vineyard, but we can live together in peace.

Office Schemes

[FROM PAGE 22] physician, under average conditions, in "going modernistic." We are prone to confuse the terms "modern" and "modernistic." While it is perfectly true that a 1913 Reception Room cannot create a 1931 impression, it is equally true that the furnishings which we term "modernistic" have by no means been universally accepted by the persons who are living in this thirty-first year of the Twentieth Century.

Laying aside our personal likes and dislikes, which are relatively unimportant anyway, the fact re-

In Cases of RENAL CALCULUS

Cysto-Sedative not only calms the irritability of the genito-urinary canal, but also aids in the expulsion of renal, urethral or cystic calculi. This action is obtained to a great extent from the Pichi contained in Cysto-Sedative.

The Cysto-Sedative formula also consists of Thuja, which gives tone to the bladder and corrects urinary frequency; Saw Palmetto, for which there is important clinical testimony indicating its value in the production of catarrhal irritation; Triticum Repens, particularly valuable in Cystitis and Pyelitis; Hyoscyamus, which is preferred to opium as a sedative in renal, ovarian and uterine affections.

Literature and complimentary sample sent on request.

STRONG, COBB & COMPANY, Inc.

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Manufacturing Chemists for 99 years



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S E D A T I V E**



G.P.'S THE ANSWER TO YOUR PRAYER FOR A Practical Skin Book

Goodman wrote, "Treatment of Common Skin Diseases" to fill YOUR need for a practical skin handbook—to enable you to treat successfully those 13 diseases which make up more than 60% of the total commonly treated by physicians. Earn the gratitude of patients by detecting these conditions during routine visits.

Sounds impractical? Not when you see Goodman's TREATMENT OF COMMON SKIN DISEASES—which stands alone as the one practical handbook for the G.P.

300 prescriptions, 72 illustrations, 350 pages of text, compounding directions for creams, lotions, ointments. Explicit procedures for diagnosis and treatment.

8 out of 10 patients in the G.P.'s office need treatment for some skin condition. If you want to render a complete, modern service to your patients, you may well consider the price of this book—\$10.00—low for its potential benefits.

Just one of the clinically-tested prescriptions could be worth that. Prove this for yourself, on a money-back guarantee.

**IT WILL PAY YOU
TO CLIP THIS
COUPON NOW**



MEDICAL LAY PRESS,
18 East 89th St.,
New York, N. Y.

I enclose check for \$10 for the new text "Rational Pharmaceutical TREATMENT OF COMMON SKIN DISEASES," by Herman Goodman, M.D. After 5 days examination, if I do not want the book, I will return it and my purchase price will be refunded in full.

M.D.

Address _____

such a work exhibited. In the find no and There why pri tal di sights in the Rooms should pital a Often Treat The vary cases. specia will h I may ever, For amini ment screen water In find Lamp

mains that John J. Average and his good wife are not "at home" in the modernistic environment. And we have dwelt at length upon the importance of making them feel comfortable while they are our guests. There is still another consideration which weighs heavily against the modernistic move. Rightly or wrongly, the Averages regard modernistic furnishings as a fad; a fad indulged in by rather freakish persons. And the Averages hesitate to entrust their sacred health and physical welfare to a faddist. They feel much safer with a physician who has demonstrated more conservative tastes.

And as every doctor knows, these unexpressed reflections are of the greatest importance.

Where space permits, doctors are coming more and more to the idea of a Consultation Room, separate and distinct from the Examination and Treatment Rooms.

This Consultation Room will continue the warm friendliness of the Reception Room, but it may reflect perhaps to a somewhat greater degree the personality of the physician. Here, for example, is the place for the doctor's personal picture gallery—autographed photographs of notable patients, distinguished fellow townsmen, and the fellow physicians of high standing. Out of place in the Reception Room, these pictures are entirely permissible in the private office. They are legitimate, indirect and potent means of building prestige.

Here, too, the doctor may display the fruits of his hobbies and adventures—curios he has collected on a foreign tour; trophies won at golf or other sports; the big fish he caught last Summer, or the elk horns brought from the Canadian wilds. While a display of a 1926 Permit to Practice Medicine may be valueless, if the doctor has a diploma denoting some unusual achievement,

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such as foreign post graduate work, this may very well be exhibited.

In the Consultation Room we find no display of surgical steel, and no instruments whatever. There are many sound reasons why patients suffering from mental disorders and kindred ills should be spared these harrowing sights. Such equipment belongs in the Examining and Treatment Rooms. The Consultation Room should have as little of the hospital atmosphere as possible.

Often the Examining and Treatment Rooms are combined. The equipment will of course vary greatly with individual cases. Each physician, whether specialist or general practitioner, will have his own requirements. I may tentatively suggest, however, some such plan as this:

For the Examining Room: Examining Table, Sterilizer, Instrument Cabinet, and a concealed or screened sink with running water.

In the Treatment Room we find a Treatment Table, Sun Lamp, Diathermy, and so on.

•

It might be well at this point to say just a word concerning objectionable displays. Perhaps I can best make my point by telling an experience of a well-known surgeon. This surgeon has a hobby of gathering cancerous growth, portions of anatomy, etc., removed from his patients in various operations. The collection is the pride of his heart. The specimens are kept in large glass jars, preserved in alcohol. Formerly they were on a shelf, in plain view of the treatment table. Finally, a particularly sensitive patient protested bitterly, and the jars were removed to a closed cupboard. But how many other patients, in the interval, had been adversely affected? Doctors naturally become hardened to such sights, but they should remember that the laity are more chicken-hearted.

[TURN THE PAGE]

APIOLINE
(Chapoteaut)

WHY APIOLINE?

Because it relieves pain due to uterine congestion.

Because it stimulates utero - ovarian circulation and local leukocytosis.

Because it helps to eliminate toxins and debris. Prescribe it in all functional disturbances of menstruation —1 or 2 capsules, t.i.d., before meals.

May I try Apioline, please?

..... Name

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Apioline (Chapoteaut) is marketed in vials of 24 capsules, 20 etgms to the capsule.

**LABORATOIRE DE
PHARMACOLOGIE,
Inc.**

92 Beekman Street New York, N. Y.

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U. S. Dist.

E. FOUGERA & CO., Inc.
75 Varick Street, New York

In your next Vincent's Case

Try TRENT at your first opportunity in a case of Vincent's Angina. It combines the cleansing properties of Sodium Perborate with the antiseptic action of Ortho-Iodo-Benzoinic Acid. TRENT soothes irritated tissues and promotes healing. A sample on request to TRENT LABORATORIES, 307 Central Avenue, West, Cleveland, Ohio.

TRENT is packed in individual envelopes, each containing the right amount for a single treatment. . . twenty-four in a carton, Cellophane wrapped to insure freshness.



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The examination and treatment of children is likely to become something of an ordeal. In this matter of handling children, there appears to be two distinct schools. Some doctors have gone so far as to make their offices minor kindergartens with a trained attendant and a variety of toys to attract the child.

There are other doctors, however, who sincerely feel that such tactics gain little and are a waste of time. After all, they reason, the inevitable examination cannot be indefinitely postponed. Why not get at it promptly? Short and businesslike is the examination and treatment. Not that the doctor is brusque. He probably will carry on a bantering conversation with his young subject, but all the while he is progressing steadily with his work.

At the conclusion of the treatment the doctor may bestow a reward—a bar of candy, perhaps; a trifling toy. This is sound psychology. On future visits, the child will minimize the discomfort of the treatment, in anticipation of the reward.

Abstracted from the W. D. Allison Company's booklet "Practical Selling Suggestions."

Convalescent Home

[FROM PAGE 14] Furniture dealers are glad to part with repossessed and reconditioned furniture on easy payments.

In four years' experience we have worked out the following suggestive schedules: The cost of food (better than the usually monotonous, uninspired "standard" hospital diet) for one patient will approximate \$5 a week. That for two patients, \$8; four, \$12; eight, \$20; twelve, \$30; twenty, \$48.

Thus, two patients paying \$15

An Advance in Parenteral Liver Therapy

A Refined and More Concentrated Solution of Liver Extract for

INTRAMUSCULAR INJECTION

BY the new process employed in the Lederle Laboratories the volume per dose has been reduced 40 per cent and the substances responsible for undesirable reactions largely eliminated.

Solution Liver Extract (Lederle)
Refined and Concentrated for intramuscular injection. Each vial contains the material obtained from 100 grams of liver in three cubic centimeters.

Samples and literature to physicians on request.

LEDERLE LABORATORIES
INCORPORATED
NEW YORK



SEE HOW THE NEW SANI-TAB*

IMPROVES THE NIPPLE!

Protects the sterilized rim of the nipple from contamination by finger and thumb when applying. Makes application easier. An exclusive feature of the genuine ANTI-COLIC brand 3 hole nipple.

*Protected by U. S. (and foreign) patents.

SAMPLE FREE—Mail Coupon

**DAVOL RUBBER COMPANY, Dept. B-7,
Providence, R. I.**

Please send me FREE samples of
Sani-Tab Nipple and bottle cap.

Name

Address

City and State

July, 1932

in hypertension

Lower level maintenance counts more than sudden falls—

The modified Brunton-Thrush formula in

PULVOIDS NATRICO

is well recognized for its **MAINTENANCE** of lowered blood pressure, and its persistent influence for a gradual decline symptomatically.

THE PULVOID FORM is as important as the formula. Developed by careful research in Drug Products Laboratory, each lot closely controlled for constancy and uniformity, Pulvoids Natrico preserve the labile and easily deteriorating Sodium Nitrite and Nitroglycerin without deterioration for a considerable period of time. Enteric coated, they cause no gastric distress. Friable, pulverous (by our exclusive Pulvoid Process) they disintegrate and become available promptly in the intestinal tract!

Try Pulvoids Natrico now when hot weather adds to the hypertensive's trouble

THE DRUG PRODUCTS CO., Inc.,
26-41 Skillman Avenue,
Long Island City, N. Y.

Special ONE-TIME offer—For a limited period—200 Pulvoids for \$1.00 cash with order. Not good after August 15, 1932. Send me free copy of "High Blood Pressure, Its Causes and Symptomatic Treatment."

Dr. _____

Address _____

a week will pay an average total of \$130 a month. This sum will provide laundry, rent, light, heat and maintenance for an impetuous doctor and his wife and a cook-nurse-of-all-work. Ten patients will provide the hire of a practical nurse and net the cook-partner \$150 a month, with full maintenance; and the doctor \$150 with room and board if he still wishes to live in the convalescent home. Twenty patients will net the doctor \$250 a month and give him an organization of one or two nurses, a head nurse (who, if a partner, will receive about \$150 net a month with maintenance), a cook and a dishwasher.

Another expedient that sometimes makes for more careful management—when the doctor leases or owns the house—is to give a board, room and nursing concession to a cook, nurse, or experienced boarding-house operator. By this device he furnishes medical care and equipment and the house while the concessionaire receives the privilege of furnishing tray-service, beds, laundry, room furniture and nursing. Any experienced cook can take a concession of this sort and make an excellent profit for \$10 a week per patient.

This arrangement, from the viewpoint of the doctor, has two admirable features:

1. It relieves him from all responsibility as to buying and stewardship with which he would of necessity be burdened under a partnership.

2. It demands that the woman holding the concession be as vitally interested in holding patients as the doctor. This is important sometimes in the matter of service, and operates as a self-revealing check upon the contrasting weaknesses of the two departments. If patients leave because of food or nursing the responsibility is as clearly allocated as if they leave because of poor medical care.

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On a \$15 a week basis under the concession plan the doctor receives \$5, from which must come rent and the reward for his own services. With a \$40 rent to meet he can break even (though securing his own rent) with two patients. Ten will give him a living. With twenty he can double the rent and clear a greater net profit than that acquired by the majority of practitioners in any city he chooses for a seat of his endeavors.

Twenty chronic patients will require not more than two hours a day of a doctor's time. Naturally, as he is the one who determines the program he may arrange that these hours come at a time that will not interfere with his office practice or other work. They may be deferred to the evening if expedient.

•

The average hospital and sanatorium price, I have indicated, is \$5 a day. I have had managers of both speak to me in this wise:

"Every year we attempt to budget our overhead in a manner that will permit us to reduce the price of a few rooms. But at \$5 we scarcely make expenses. We haven't made a dollar profit since we opened."

I have intimate knowledge of the financial workings of five large sanatoria in widely separated sections of the country. Four of them just do—break even. And for one or all of these obvious reasons:

1. A never-ending conflict between trustees and medical staff. Ordinarily each trustee has meat, groceries, plumbing, plastering men or laundry service to sell to the institution at fancy prices. Usually, each staff member demands service, nursing and equipment beyond all the simple requirements of chronic or convalescent patients; thousands of dollars are tied up in equipment most of the time.

2. The unimaginative use of

Treat Food Poisoning by Adsorption

ADSORPTION is the true antidote for bacterial toxins and toxalbumins in contaminated foods. Its effect is speedy and certain.

The two common types of acute food poisoning are—ptomaine poisoning due to poisons preformed in the food, and poisoning due to the ingestion of bacteria which infect the mucous membrane of the gut.

Kaylene, acting by adsorption, is effective in both varieties.

PRICE REDUCTION

Kaylene-oil (in constipation) is now being dispensed by druggists at \$1.50 per 16 oz. bottle.

E. FOUGERA and CO. Inc.

75 Varick Street, New York City

SOLE AGENTS: KAYLENE LTD., LONDON, ENGLAND

What is the Value of Yeast in CONSTIPATION . . . in SKIN DISORDERS . . . as an ANTIRACHITIC agent?



MANY physicians have asked for a brief summary of the principal scientific facts about the medical value of yeast.

Here it is! This revised edition of the popular booklet, "Yeast Therapy," will go far in showing you the reasons why Fleischmann's Yeast is so widely used and discussed in medical practice today.

This booklet contains sections on "What is Yeast?" "Yeast Therapy" (its history), "Constipation," "Boils, Furunculosis, Acne and other Suppurative Skin Diseases," "Irradiated Yeast and Vitamin D," "Sources and Importance of Vitamin D," "Yeast in Pellagra," "General Debility," "Arthritis and Rheumatoid Conditions," "The Value of Yeast as a Food," etc.

Fleischmann's Yeast has impor-

This booklet presents the experience of well-known physicians and summarizes the results of extensive research work on yeast.

tant advantages as a source of vitamin D. Its use, particularly in the diet of expectant and nursing mothers, is being widely prescribed.

To help you keep abreast of this and other recent developments in the field of yeast therapy, let us send you a copy of this booklet today.

SEND FOR YOUR COPY

Health Research Dept. M-U-7, Standard Brands Inc., 691 Washington St., New York

Please send me revised edition of "Yeast Therapy," based on the findings of distinguished investigators.

Name _____

Address _____

registered nurses at top-notch local prices.

3. The employment of trustee's relatives, "yes men," and useless executives.

4. Indifferent management, petty graft and outright stealing.

5. Heavy indebtedness. Huge buildings and plants erected by means of mortgages whose interest and principal payments must be gleaned from the "room rate."

6. Empty beds.

•

One of the five, which began with one bed and expanded only under pressure from new patients, and which paid a dividend from the day of its opening, nets \$15 a week from each patient. The medical fees are added to that. Several tuberculosis sanatoria with whose operations I am casually familiar pay each staff member \$25 a month for each patient he brings in and is able to keep. This sum is in addition to whatever fees the doctor collects from the patient.

•

The advantages possessed by the convalescent home in cutting costs may be listed:

1. There are no trustees, and no staff.

2. There are no urgent mortgage payments.

3. Because the doctor can personally take time to supervise each act of nursing, he need employ only undergraduate nurses. The registered nurse is a convenience to the busy physician who cannot take time to closely superintend those of his instructions that require experience.

The average chronic case does not so much need nursing as thoughtful and careful chamber-maiding. To understand any special aspects of a case a registered nurse will require as much immediate instruction as an undergraduate. The value of a nurse depends upon her experience—not her R. N. And her experience in chronic cases is worth no par-

REVELATION TOOTH POWDER



is a dentifrice such as you have always wanted. It is ideal in every way and is a thorough cleanser.

For proof we want you to try the powder so send your professional card for full size can of Revelation and literature without charge.

August E. Drucker Co.
2226 BUSH STREET, SAN FRANCISCO

Liberal Sample of **MU-COL**

**Aseptic,
Prophylactic,
Anti-Catar-
rhal,
Anti-Pruritic
A Cooling,
Healing,
Post-Opera-
tive
WASH
that Gives
Effective
Results.**

FREE

A host of physicians turn to Mu-col when it is undesirable to prescribe or use corrosive coal tar, or phenol washes in effective strength. Cooling, soothing, it is a fine prophylactic and detergent. Assures cleanliness throughout the entire membranous area. A saline-alkaline powder, easily soluble in water. Superior for feminine hygiene.

Mail Coupon for Sample NOW

Mu-Col Co., Suite 347-M, Buffalo, N. Y.
Send sample of Mu-Col, enough for
6 qts. FREE.

Name..... M. D.

Address.....

(please attach coupon to your letterhead)

PSORIASIS

Successfully Treated

In psoriasis, order a daily 10 minute tepid bath, followed by the application of Inoton to the lesions. Diet should be low in protein.



PSORIASIS GYRATA

Inoton

E. FOUGERA AND CO., INC., 75 Varick Street, New York



**For Hot Weather Nerves
and Insomnia**

PEACOCK'S BROMIDES

Generally preferred because its five bromide combination insures a greater margin of tolerance. Gives maximum bromide results with least danger of bromism—

Therefore:

(besides its general adaptability
in Epilepsy and nervous troubles)

**The Standard and Favored
Bromide Sedative for Head-
aches and Sleeplessness**

Samples On Request

15 grains combined
bromide salts per
fluid dram (teaspoonful)

OD PEACOCK SULTAN COMPANY
St. Louis Missouri

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ticular premium when a doctor is at hand to assume cerebral responsibility.

Nursing, at most, in an establishment treating chronic diseases, resolves itself into mechanical, routine procedures: making beds, bathing, the tactful manipulation of a bed-pan, reading a thermometer, dressing a bed-sore under tutelage, sweeping a floor with dignity and restraint, and not least—the curbing of all compulsion to gossip, advise, or recite lugubrious narrative.

In dealing with nurses I have often wished they were burdened with less experience. Too many times experience results in the formation of inelastic mental fixations. And too often one is confronted with:

"When I was at Philadelphia General, Doctor Smith always..."

*

To avoid becoming tiresome I would like briefly to assure the interested beginner that, if he will solve or anticipate emergencies himself, and instruct each nurse in each peculiar aspect of the case of a chronic patient, his results will be as successful with the use of sensible practical nurses as with the registered article. The patient will benefit since he will be treated as an individual and not as "another case of disseminated sclerosis".

The end result of this choice to the small convalescent home is the saving of overhead. Under-graduate nurses may be procured for a half of the standard scale for registered nurses.

I am loath to leave the subject, however, without a conciliatory bow towards an old, honorable and useful calling. Trained nursing is unquestionably a priceless adjunct in the treatment of many ailments.

*

The convalescent home, then, need not be subject to those burdens of a large sanatorium which

IN HAY FEVER



Reach, Cover, Lubricate and Protect the Upper Post Nasal Orifices

- V-E-M and ZYL Nasal Ointments are scientifically fixed for melting point and specific gravity on the mucous membrane surface. Pneumatically shot into the nostrils and snuffed past the turbinates in measured globules, these heavy base ointments become a spreading viscous film. This film is motivated by the pressure and direction of the breathing process. It reaches, spreads over, lubricates and protects the upper as well as the lower post-nasal cavity walls.

- Free package to doctors only.

V-E-M NASAL OINTMENT
WITH APPLICATOR

Z Y L V-E-M PLUS
EPHEDRINE

SELF PROPELLING



SELF SPREADING

SCHOONMAKER LABORATORIES, INC.
Caldwell, New Jersey

July, 1932

DO YOU INHALE?



Why is this vital question so much avoided by other cigarettes?

EVER since Lucky Strike created that special process for purifying fine tobacco and told the full facts about cigarette smoking—the industry has been in an uproar. For Lucky Strike has dared to mention things that were considered "taboo" in the cigarette trade.

You may have noticed a striking avoidance generally of the word "inhale" in cigarette advertising. Why? Goodness only knows! For everybody inhales—knowingly or unknowingly! Every smoker breathes in some part of the smoke he or she draws out of a cigarette.

That's why it's all-important to be certain that your cigarette smoke is pure and clean—to be sure you don't *inhale* certain impurities.

Do you inhale? Lucky Strike has dared to raise this vital question—for it gives you the protection you want...because certain impurities concealed in even the finest, mildest tobacco leaves are removed by Luckies' famous purifying process. Luckies created that process. Only Luckies have it.

"It's toasted"

Your Protection—against irritation—against cough



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raise its operating costs. What medical equipment is necessary can be of a portable character. It may thus serve the doctor at his office as well. This is particularly true of an X-ray apparatus. We have determined that the standard Wappler portable unit fulfills every roentgenographic demand of the convalescent home and the ordinary general office practice. It may be carried upstairs or in a passenger automobile. It can be used for bedside work; and is easily transported between office and convalescent home.

The doctor, if he desires, with such a unit, may further add to his income by doing bedside work in the homes of patients—for his colleagues. The standard fee for this type of work is \$25 for each trip. A portable apparatus can be obtained on a payment down basis, and will quickly pay for itself in the hands of an energetic operator. A convalescent home with ten to twenty patients will pay for an X-ray unit, ultraviolet ray equipment, and diathermy apparatus as fast as payments upon them fall due.

The young physician having an institution such as I have described, whether it has one bed or twenty, may approach his fellow practitioners for referred patients with a philanthropic attitude; a feeling infinitely more agreeable than that induced by begging crumbs with a charity plea. There are few established city practitioners who do not have home patients they feel would profit by institutional care. This is especially true of hopeless cases of tuberculosis, cancer and paralysis. Often the finances of these patients have been drained by their long-continued illness. Beyond routine nursing to keep them comfortable they rarely require more than the convalescent home can give them.

In the case of chronic communicable diseases, the routine

Thialion

is a dependable agent
to prescribe in rheu-
matism, gouty condi-
tions, biliousness,
constipation and
wherever there is evi-
dence of acidemia or
decreased alkalinity.

Literature on request

VASS CHEMICAL CO.
Danbury, Conn.

HAY FEVER



*quickly
relieved
with*

EPHEDRINE

in new, convenient form

EFRACOIDS contains ephedrine hydrochloride, camphor, menthol, phenol and boric acid in a small Nasule. Top of neck is simply clipped off and part of contents squeezed into each nostril. EFRACOIDS gives proper therapeutic aid in relieving all nasal congestion. Quick. Convenient. Sanitary.

EFRACOIDS

HARRIS DRUG CO., Inc., ME-7
232 E. 125th St., New York.

Please send me professional package
of EFRACOIDS—gratis.

Name _____

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July, 1

ERGOAPIOL (SMITH)



Capsule cut in
half through the
seam, showing
initials.



Capsule intact
showing no mark
objectionable to
the physician.

AMENORRHEA DYSMENORRHEA and other MENSTRUAL DISORDERS

ERGOAPIOL (Smith) proves unusually efficacious in the various anomalies of menstruation arising from constitutional disturbances, atonicity of the reproductive organs, inflammatory conditions of the uterus or its appendages, mental emotions or exposure to inclement weather.

As a safeguard against imposition, the letters M.H.S. are embossed on the inner surface of each capsule. ERGOAPIOL (Smith) is supplied only in packages of twenty capsules each.

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necessary to prevent cross-infection is easier to conduct than at home. When emergencies supervene that call for major operative interference, patients may be moved in an ambulance to a hospital for the period necessary for the procedure. Dressings and post-operative care may be carried on at the convalescent home.

The unknown young doctor may ethically advertise his institution to other doctors through medical publications, announcements, and personal contacts—a circumstance that will perceptibly hasten the security of his establishment in the city.

In most states, rural counties and municipalities eagerly seek responsible and inexpensive metropolitan hands to whom they may entrust their indigent cases of tuberculosis and incurable chronic diseases. County health officers and public health nurses are always substantial supporters of this type of institution.

I have suggested a basic rate of \$15 a week. This has been found adequate for our purposes. When the convalescent home flowers to a degree to permit a few rooms of better furniture, private verandas, private baths or other luxuries, the price reasonably must be higher. Sometimes, in the case of helpless, incontinent paralytics, terminal tuberculosis and cancer, and mild mental diseases, special full-time nurses will be required. This service calls for additional fees.

Not a few convalescent homes and sanatoria within my knowledge advertise a basic rate of \$12 a week. However, there is nothing to prevent an institution beginning with a weekly rate of \$15 to grow into a sanatorium with a basic rate of \$35. Many of the best-known institutions in the Southwest, California and on the Eastern Seaboard have had beginnings as meager as I have pictured. [TURN TO PAGE 112]

SOIL

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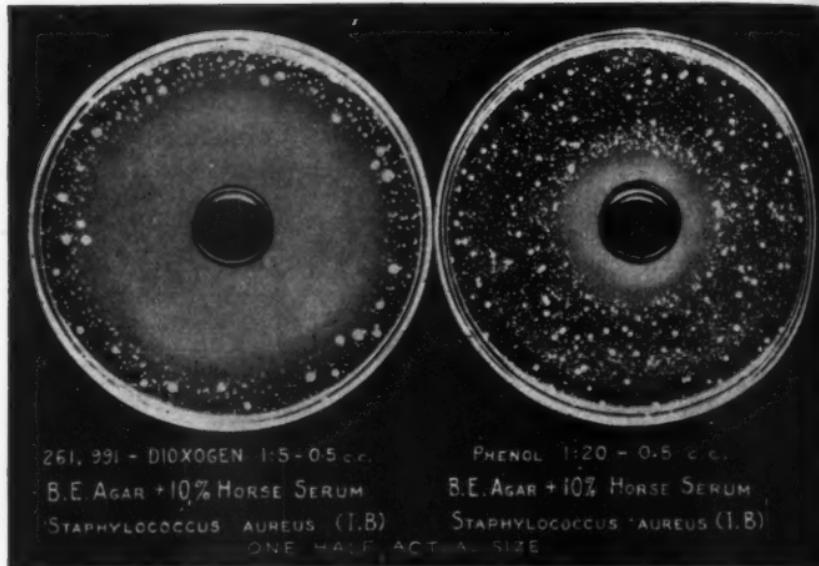
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- The culture medium used (Beef Extract Agar and 10% horse serum) and nearest in its properties to the body tissues and fluids was inoculated with a 24 hour broth culture of *Staphylococcus aureus* (I.B.) and then placed in 2 petri dishes and allowed to cool.
- The antiseptic was then put in cup or hollow space formed by removal of a disc, 2 cm. in diameter, from center of each dish.
- Both dishes were then incubated at 37° C. for 48 hours.

- The clear zones surrounding each cup show where the germs have been destroyed and growth stopped.
- The spotty, mottled areas beyond clear zone show undisturbed germ growth.
- The distance from cup to outer edge of clear zone, measures penetrating efficiency of the antiseptic.

There was no effect on the blood serum. Dioxogen, straight, destroyed all bacteria for a distance of 3.2 cm. from cup; Dioxogen 1:5 (see photo) for a distance of 2.5 cm. from cup. Phenol (1:20) for only 0.45 cm.

The OAKLAND CHEMICAL CO. 59 Fourth Ave., New York, N. Y.

Please send me a professional sample of Dioxogen, with literature.

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[FROM PAGE 109] In advertising and publicizing his institution, the young doctor will do well to emphasize its name and his own, and his downtown office which he can do ethically.

•

The question of city office rent often fills a newcomer with apprehension, and often induces him to seek cheap quarters in an out-of-the-way location. It will pay him in the long run to take office space in the same building with the foremost physicians in the city. He may do this in any city by occupying, at first, a cubby in the office of a successful older practitioner, and availing himself of the latter's office staff and equipment. These quarters are available in any building at a rental absurdly small in contrast with what independent space and staff and equipment would cost him.

In such a location he may establish the downtown office of his convalescent home and maintain it with dignity and assurance. The association with the older man will be profitable from the standpoint of contacts, advice, anesthetics and referred work. It will help the younger practitioner to preserve a proper perspective towards the various elements of his work, and will assist him to resist any appeal of commercialism that his scramble for business may introduce.

Finally, I would like to assure him that he need not be discouraged by the propaganda contained in the financial statements of municipal, county, or state hospitals relative to their costs per patient day. They are misleading. Nowhere is ignorance, mismanagement, graft and incompetence more firmly entrenched than in the personnel of public hospitals of every variety; that is my opinion.

Doctor: You know these ingredients

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